

SUNSHINE COAST EISTEDDFOD – WIND ENSEMBLE

12 July 2016



Dear Parents/Carers

The next performance for the Wind Ensemble is upon us with the Sunshine Coast Eisteddfod scheduled for early Term 3.

This event provides a wonderful opportunity for our students to showcase their talents in the local area and continue to hone their performance skills.

Below are the details of the event:

- When:** Tuesday 2 August 2016
- Where:** Matthew Flinders Anglican College Performance Centre
- Time:** Session commences at 4.15pm. Once students arrive, they will need to be seated in the auditorium as a school group as close as possible to the commencement of the session. They will move as a group to the warm up area at 4.50pm and will perform at approximately 5.15pm. The session should conclude by 7.00pm.
- Requirements:** Students will need to wear formal school uniform and bring their instruments.
- Cost:** Nil for instrumental music student competitors.
***Parents please note that due to the high cost of the venue there will be an admission cost of \$5.00 per adult and \$2.00 per child (except competitors) for the session.*
- Transport:** Own transport.
The session should be finished by 7.00pm

As this is a professional performance showcasing our school to the community, all students are expected to dress in correct uniform as outlined below.

- **Uniform:** Formal school uniform.
- **Shoes:** Black shoes with white socks (socks must be visible).
- **Hair:** Neat and pulled off the face. School colours in hair only.

As this event requires your own transport, if you have any problems with transporting your child to and from the event, please let Mr Hucknall know on the attached form as early as possible so we can organise help if needed.

Please note, as per the College Driving Policy, students are not permitted to drive themselves to class-based activities.

Any relevant changes to medical details or emergency contacts that are currently kept on record by the college should be updated immediately.

This includes information on any recent medical conditions that may limit, or be aggravated by your student's participation in this activity.

This also includes details on any medication currently being taken that might be relevant in a medical emergency.

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@MeridanSC Website: www.meridansc.eq.edu.au

Address: 214 Parklands Boulevard, Meridan Plains, Caloundra Qld 4551

Phone: 07 5490 2666 Email: admin@meridansc.eq.edu.au

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Please be aware that when involved in activities there is an inherent risk of physical injuries occurring without any negligence on the part of the school and in such circumstances the responsibility for the injury and any associated costs will rest with you and not the school.

Parents are advised that the Department of Education, Training and Employment (DETE) does not have Personal Accident Insurance cover for students. DETE has public liability cover for all approved school activities and provides compensation for students injured at school only when the Department is negligent.

If this is not the case, then all costs associated with the injury are the responsibility of the parent or carer. It is a personal decision for parents as to the type and level of private insurance they arrange to cover students for any accidental injury that may occur.

Please complete the tear off section attached and return to Mr Hucknall by Wednesday 27 July 2016.

If you have any questions, please do not hesitate to contact Mr Hucknall on 5490 2796 or via email bhuck3@eq.edu.au .

Yours sincerely

Brendan Hucknall
Instrumental Music Teacher

Fiona Free
Principal - Secondary

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RETURN TO MR HUCKNALL BY: Wednesday 27 July 2016
COORDINATOR: Brendan Hucknall
EVENT: Sunshine Coast Eisteddfod - Wind Ensemble
DATE: Tuesday 2 August 2016
COST: Nil

I give permission for (student's name) _____ of class _____ to participate in the Sunshine Coast Eisteddfod.

As this event requires private transport please complete the following questions:

YES / NO I will be transporting him/ her only.

YES / NO MY child will be attending, but I require assistance with transport.

My phone number is _____.

(I understand that I will be advised of the other parent who will be transporting my child and understand that they will be given my phone number.)

YES / NO MY child will be attending and I can assist with the transport of ___ others if required.

- I acknowledge that the Department of Education, Training and Employment does not have Personal Accident Insurance cover for students.
- I understand that all students are expected to adhere to the planned program.
- For the safety of your child it is the responsibility of the Parent/Guardian to ensure that the Medical Details and Emergency Contacts are correct and that any alterations are made before the excursion.
- I acknowledge that the Department of Education, Training and Employment does not have Personal Accident Insurance Cover for students.
- I authorise the teacher to seek appropriate medical assistance where deemed necessary.
- I understand that students must abide by the College Responsible Behaviour Plan expectations during this activity.

Parent/Carer Signature: _____

Telephone contact number: _____

Parent/Carer Name: _____ (Please print name)

Date: ____ / ____ / ____

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