



## MANLY WEST PRIMARY SCHOOL

GRIFFITH STREET, BALGOWLAH 2093

Tel: 9948 2257, 9948 1959

March, 2021

### **Dance Group Information.**

Dear Parents,

Congratulations, your child/ren have been successful in auditioning for the Many West Dance Groups.

Manly West has two dance groups which all audition for the Sydney North Region Dance Festival. This Dance Festival is always held in **the last two weeks of Term Two**. If you will be away during those two weeks your child/ren unfortunately will be unable to proceed in their group.

Teachers and the specialist dance teachers dedicate a lot of time choreographing and then rehearsing dynamic and exciting routines. It is therefore too difficult to replace a dancer because he or she is going on a holiday. If this is the case could you please inform the dance teacher immediately as there were a lot of children who missed out on this opportunity.

The two dance groups within Manly West are:

1. Senior Girls: open to Years 5 & 6 only, rehearsing on a Monday lunch.
2. Boys Dance Group: Years 5 & 6, rehearsing on a Wednesday lunch.

The Dance Festival is held at the Glen Street Theatre. Due to Covid-19 the regulations have changed. The groups will attend a Dress Rehearsal (costume and full make-up), which will also be when they are filmed. Their filmed piece will then be shown on the new screen at the theatre. Each item will be shown in one 5:30pm 'show' and at one 7:30pm 'show.' Due to restrictions changing, this format too may change in the course of time.

There is a cost involved with this activity, including costuming, buses to and from the Dance Festival for their dress rehearsal. This cost, once known, will be included on their Semester Two account.

I'm sure that your child/ren will thoroughly enjoy the experience, particularly if it is their first time selected in any of the groups. Please contact me if you have any queries.

Please complete the permission note and return it to the appropriate teacher to confirm your child's place within his/her group.

**Ms Becky Wilson.**  
**Dance Co-ordinator.**

**Mrs Julie Organ.**  
**Principal.**

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**PERMISSION NOTE -- SYDENY NORTH REGION DANCE FESTIVAL --**  
**PLEASE RETURN TO: Becky Wilson (Girls Dance Group) and Chloe Mansbridge (Boys Dance Group).**

**Privacy Advice:**

The personal information provided on this consent form will be used by the Department of Education and Training for general administration and communication and other matters of welfare relating to your child at this excursion. While the provision of this information is voluntary, it is strongly recommended that all details are completed. Failure to do so may impede the resolution of welfare issues if you are not able to be contacted. This information will be stored securely. You may access or correct any of the details at any time by contacting the school.

*I hereby consent to my child \_\_\_\_\_ in class \_\_\_\_\_ participating in the **Regional Dance Festival sometime in the last two weeks of Term Two** . It is my responsibility to provide sunscreen for my child and to ensure that he/she understands that they need to reapply the sunscreen throughout the excursion. I am aware that some children in our school could have a severe reaction if they come in contact with nuts and will avoid sending nuts (or any bi-product) with my child. I understand that transport to and from the Glen Street Theatre will be by bus.*

**The cost of this event/excursion has been included in the Semester invoice.**

**Special needs** of my child of which you should be aware (ie: allergies, medication).

☐ Anaphylaxis      ☐ Asthma      ☐ Epilepsy      ☐ Diabetes

☐ other (please

state \_\_\_\_\_

☐ medication (please state) \_\_\_\_\_

☐ food requirements (please state) \_\_\_\_\_

**Allergies**

☐ sun      ☐ grass      ☐ dust      ☐ pollen      ☐ insect bites

☐ allergy to the following medication/s: \_\_\_\_\_

☐ other (please state) \_\_\_\_\_

*Parents should ensure that all medication and action plans for student medical conditions are current and have been supplied to the school.*

**SIGNATURE of PARENT/GUARDIAN .....**

**DATE .....**

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