10th February 2015

Dear Parents/Guardians,

The grade 5 students will be inquiring into 'our thoughts and actions affect the way we feel'. We have planned an excursion to visit the Sun Theatre in Yarraville on Thursday 26th February 2015. Students will watch *Paper Planes*, an imaginative children's film about a young Australian boy's passion for flight and his challenge to compete in the World Paper Plane Championships in Japan.

We encourage all students to take part in this learning experience to support their inquiry learning and understanding.

The cost of this excursion will be $16.00, which includes admission and transport to and from the Sun Theatre. Please ensure that you sign the back of the envelope and enclose $16.00 in the envelope provided. Payments must be made no later than Tuesday the 24th February 2015.

Students will depart at 9.00am and will return to Seabrook Primary School at approximately 12.30pm. Students must wear full school uniform. Students may also bring a snack and drink to enjoy while viewing the movie. Please do not provide any drinks in glass bottles for safety reasons.

Payments can be made using a number of options including Eftpos, credit card, cheque or cash.

We would also appreciate some parent volunteers to accompany each class on this exciting excursion. If you are able to support your child's class by attending our excursion please contact your child's classroom teacher.

Should you have any queries regarding this excursion please contact your child's classroom teacher at Seabrook on 9395 1758.

Kind Regards,

Jay Basa, Aaron Chaston, Kristen Payne, Erin Prowd and Alex Vivoda

The Grade 5 Teachers

permission slip – grade 5 movie excursion

Thursday 26th February 2015

(Please fill in and return to your child's teacher)

I give permission for my child ____________________________ of Grade ______ to participate in the above activity. I authorise the teacher in charge to consent where it is impracticable to communicate with me to the child receiving any medical or surgical treatment as may be deemed necessary.

Signed ____________________________ (parent/guardian)

Contact number in case of an emergency ____________________________