

## **Chisholm Catholic Primary School**

30 Collith Avenue, Bligh Park NSW 2756 PO Box 5724, South Windsor NSW 2756

Tel: (02) 4573 3200

Email: chisholm@parra.catholic.edu.au www.chisholmblighpark.catholic.edu.au

## **Community Outreach - FIAT**

Monday 2 December 2019

5 November 2019

Dear Parents and Carers,

The festive season is fast approaching and students who are a part of the Faith In Action Team (FIAT) are invited to be part of a community outreach event at one of our local aged care facilities, Hawkesbury Living in Richmond, on the Monday, 2 December.

Students will engage in conversation with the residents, take part in craft-like activities and play games whilst enjoying a light morning tea. They will also be hand delivering the Christmas cards that have been made the students of Chisholm as part of our "Christmas Card Competition."

Students will be required to wear full school uniform and will need to bring their hat. They will not be required to take anything else with them but a drink bottle if they wish. We will be traveling to the nursing home via bus which will be departing school at 9 am and will arrive back at school by 11:30 am.

Below is a permission form to be filled out by you. This form allows your child to attend, informs us of any illness which may affect your child on the day. Due to the regulations of numbers, we will only be accepting the first 30 notes received by students. These notes are to be handed directly to Mrs. Attard or Mrs. Hartog to avoid confusion. To avoid disappointment please ensure the permission slip is completed and handed in promptly.

2 December 2019 Date:

**Hawkesbury Living Nursing Home** (108-116 March St, Richmond) Venue:

Transport: **Bede Polding School Bus Dress Full School Uniform** 

Together we can make a difference!

**FIAT Teachers** Mrs Stephanie Attard & Mrs Jo Hartog



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## **Community Outreach - FIAT**

I give permission for my child of class	s to attend the community
outreach event at Hawkesbury Living (108-116 March St, Ric	hmond), on Monday, 2 December with
the FIAT team. I am aware that my ch	nild will be traveling on a bus with
teachers.	
Medical De	tails
Does your child have any medical condition, of which you feel the	
Please list any allergies and the symptoms.	
Does your child need to take medication during the excursion?	(Details needed by the Teacher)
Is there any other matter regarding your child's welfare and enjoineeds to know?	syment of the excursion which you feel the teacher
Parent/Carer's Con	tact Details
During this excursion I may be contacted on:	
Mother's Home/Work/Mobile Phone No:	
Father's Home/Work/Mobile Phone No:	
Emergency Name and Phone No:	
Emergend	CV
In the event of an emergency I give the teachers of <i>Chisholm</i> of medical attention for my child. I understand that I will be notified	Catholic Primary School permission to seek
Parent/Carer's Name – please print	Parent/Carer's Signature
Date:/11/20	019
Name: Signed:	