

ST. BRIGID'S COLLEGE
A MINISTRY OF MERCY EDUCATION LTD
ABN 69 154 531 870

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CRICOS Provider Code: 00451F



ST. BRIGID'S
COLLEGE

Opening Mass for the Catholic Performing Arts Festival for 2019

Dear Parents/Guardians

I would like to advise that your daughter/son has been selected to represent St Brigid's College at the Opening Mass for the Catholic Performing Arts Festival 30-year celebration for 2019.

Date: Thursday 25 July 2019
Time: **Depart College:** 08.50am **Return College:** 12.50pm
Venue: St Mary's Cathedral, Victoria Square, Perth
Transport: College Bus
Dress/Uniform: Full Winter Uniform
What to Bring: Water bottle
Staff Attending: Mark Sills and Caterina Dwyer
Staff Contact Number: 0498 288 729

It is imperative that all students demonstrate appropriate behaviour and adhere to College rules at all times whilst on College excursions.

Please complete the attached permission/medical forms and return to **Student Reception by Tuesday 23 July.**

If you have any queries regarding this excursion, please do not hesitate to contact me via email on savino.amanda@stbrigids.wa.edu.au or by telephone on 08 9290 4200.

Yours sincerely

Amanda Savino

Acting Team Leader Arts

28 June 2019





PERMISSION FORM – MEDICAL DETAILS

Opening Mass for the Catholic Performing Arts Festival for 2019

(Please complete, sign & return this form to student reception by Tuesday 23 June 2019)

Student Name: _____ Year: _____ Class: _____

Contact Information on day of Opening Mass:		
Parent/Guardian Name:		
Home	Work	Mobile

Emergency Contact 1 on day of Opening Mass:		
Parent/Guardian Name:		
Home	Work	Mobile

Emergency Contact 2 on day of Opening Mass:		
Parent/Guardian Name:		
Home	Work	Mobile

Family Doctor:		
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Medical/Medications:	Please give accurate details of any current medications or medical conditions College Staff should be aware of (eg Ventolin, EpiPen etc)

	NOTE: Any medication needs to come in company packaging clearly labelling the contents. Prescriptions need to have students name, dosage and prescribing doctor.

Food Allergies:	Please advise of any food allergies your son/daughter has:

I give permission for my child to attend the
Opening Mass for the Catholic Performing Arts Festival for 2019
as outlined in the accompanying letter and I have attached any medical/food allergy details required.

Parent/Guardian Name: _____

Parent/Guardian Signature: _____ Date: _____