Dezzy Dinosaur’s Comedy Show
INFORMATION FOR PARENT/GUARDIAN

To be retained by parent/guardian

REASON FOR THE SCHOOL BASED ACTIVITY
Ranger Jim will be visiting Bertram Primary School with his custom built 1.5m dinosaur puppet. His amazing stage show will entertain your children at the same time as teaching them about the fascinating pre-historic world of dinosaurs. This school based activity will provide stimulus for History, Science and English activities.

ACTIVITIES TO BE CONDUCTED
Students will view a dinosaur puppet show followed by a factual dinosaur discovery talk which features five animatronic dinosaurs. Students will be able to view the dinosaurs closely and ask questions.

DATE
Monday 30th March 2015

COST
$5.00

Use your credit card to pay online at www.bertramps.wa.edu.au then return this form by email to Bertram.ps@education.wa.edu.au or to your child’s Learning Area teacher by Thursday 26th March 2015. Payment will not be accepted after this date.

OR

Please return the consent form with payment in the envelope provided to your child’s Learning Area teacher by Thursday 26th March 2015. Payment will not be accepted after this date.

A refund will not be provided if you choose to withdraw your child from this school based activity.

LOCATION
Undercover area.

SUPERVISION TO BE PROVIDED
Classes will be supervised by their regular class teachers during this activity.
# CONSENT FORM FOR DEZZY DINOSAUR’S COMEDY SHOW

**LAs 5, 6, 7, 8, 9, 12, 13, 14 & 30**

**TO BE RETURNED SIGNED TO THE SCHOOL BY THURSDAY 26th MARCH 2015**

Payment will NOT be accepted after this date

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## Contact Information

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<th>Home:</th>
<th>Work:</th>
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Other:

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I have read and understood the information regarding the **Dezzy Dinosaur’s Comedy Show** school based activity on **Monday 30th March** and give my consent for my child ______________________________ from LA ________ to attend.

*(first and last name please)*

I understand **a refund will not be provided if I choose to withdraw my child from this activity.**

I understand that my child will not participate in this school based activity if their behaviour is not appropriate leading up to the date of this activity. **I understand that in this circumstance no refund will be provided.**

**Signature of parent/guardian** ___________________________  **Date** __________

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**Dezzy Dinosaur’s Comedy Show**

**LAs 5, 6, 7, 8, 9, 12, 13, 14 & 30 @ $5.00 a head**

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<thead>
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<th>Child’s Name</th>
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**Online payment** $________  **Payment reference** ____________________________

**Cash payment** $________

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**Credit Card Payment (MasterCard or Visa)**

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**Name on Card** ____________________________

**Signature of Cardholder** ____________________________  **Date** ______/____/____

**Name** ____________________________  **Contact Number** ____________________________

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S:\Admin\Shared\Administration\Staff\850 Students\854 Camps and Excursions\School Based Activities\2015\Dinosaur Stage Show\Dezzy Dinosaur School Based Activity permission slip.doc