Graduation Dinner for Students.
Date: Tuesday 17\textsuperscript{th} December
Time: 6 pm
Venue: Performing Arts Centre, Croydon Hills Primary School
Dress: Neat, casual

Ceremony for Special Guests
Time: 7.30 pm
Venue: CHPS Stadium
Seats: Two

Dear Parents,

The Graduation Night for students will begin at 6pm with a sit-down dinner held in our Performing Arts Centre. We would like all students to assemble outside the Year 6 Block at 5.50 pm. After this special dinner the students will attend a Graduation Ceremony in the School Stadium.

You are invited to attend this Ceremony which begins at 7.30 pm and concludes at approximately 9.00 pm. Please enter via the front doors of the stadium.

At the conclusion of the ceremony you are welcome to share supper and conversation with other parents and students.

NB: Space in the gym is limited therefore there is a strict limit of two seats per student. If there are special circumstances, please contact the school as soon as possible. We will consider your request and a further seat may be allocated to you if the space in the stadium permits.

Please fill out the permission form below and return no later than Friday, 13\textsuperscript{th} December.

Thank you
Senior School Teachers.

Graduation Permission form

I give permission for ........................................... Year ..............
to attend the Graduation Ceremony held at Croydon Hills Primary School on Tuesday 17\textsuperscript{th} December.

I authorise the teacher in charge to consent, where impractical to communicate with me, to my child receiving medical or surgical treatment as may be deemed necessary.

Medical Conditions /Allergies .............................................

\textit{Parents of asthmatic children must ensure that their child has all necessary medication with them}

Signature ..........................................................

Please provide an emergency contact for between 6 – 7.30 pm on Tuesday 17\textsuperscript{th} December.

Name ..........................................................Contact Number.................................