1 July 2016

Dear Parent/Carer

After the response to the expression of interest note, K-2 students will be offered a skiing program at Thredbo. We will be skiing on Friday 12 August and Friday 19 August 2016.

Costs are as follows:

<table>
<thead>
<tr>
<th></th>
<th>1 Day: Friday 12 August 2016</th>
<th>2 Days: 12 and 19 August 2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>THREDBO SEASON PASS HOLDERS</td>
<td>$70.00</td>
<td>$140.00</td>
</tr>
<tr>
<td>NON-SEASON PASS HOLDERS</td>
<td>$100.00</td>
<td>$200.00</td>
</tr>
</tbody>
</table>

Cost includes

- National park entry
- Bus transport
- Lift ticket for non-season pass holders
- 4hr lesson from 10:30am
- Hot lunch, salad, sandwiches, drink, fruit

Full payment should be received by the School Office by 1 August 2016.

CANCELLATIONS/REFUNDS: Thredbo are unable to give refunds to students who are ill throughout the program. They are only able to refund when the illness is ski related and there is a medical certificate provided. It is not possible to refund the bus component of the program as this has been calculated on the number of children who intend participating. If, due to poor weather, the school cancels a trip and an alternate date cannot be arranged, bus money will then be refunded. An announcement will be made on the school’s Facebook page, Snow FM and 2XL at 7.15 am if a ski day is to be cancelled.

Parents are needed to assist on each of the ski days and have an important role in helping the students throughout the day. Both skiing and non skiing parents are required. We will be allocated complimentary ski passes to parents who assist staff with supervision of students during student ski lessons.

Please note: There are only a limited number of complimentary ski passes available for parent volunteers. We will advise you of details later.

All parents who attend the excursion are required to be fully contactable during the day via mobile phone in the event of changes to travelling plans and they should also be able to return within a short time frame to the departure point.

Please complete the Parent Helpers slip attached and return to school as soon as possible.

We also require information regarding your child’s experience, payment details and the consent form.

If your child’s medical details have changed, please complete a new medical information form. A new form can be collected from the school office if required.

All forms and payment are to be returned to the office no later than 1 August 2016.

Thank you for your support.

Frances Robertson
Principal

Tim Lawley
K-10 Sports Coordinator

Giovanna Davies
K-2 Snowsports Coordinator
STUDENT AND PARENT DETAILS

Child’s name: ___________________________________________ Year: ________

Parent/Carer name: __________________________________ Home Phone: _______________________

Work Phone: __________________ Emergency Contact: _______________________

Student pick up: Cooma □ Berridale □ Jindabyne □ Student drop off: Cooma □ Berridale □ Jindabyne □

SKIING EXPERIENCE

Experience (please tick) NB: To assist in determining your child’s appropriate ski ability and level please view the following link: https://www.thredbo.com.au/wp-content/uploads/2015/05/What-Level-Are-you-Kids.pdf
□ First timer (0 days experience) □ Intermediate (5-10 days’ experience, can ski most green runs confidently and ride a T bar or chairlift)
□ Beginner (0-5 days experience) □ Experienced (10 days+ experience, can ski most blue runs confidently

PARENT HELPERS

I can volunteer to help on: □ Friday 12 August □ Friday 19 August

□ I am a skier □ I am a non-skier □ I have a Thredbo Season Pass

PERMISSION NOTE

• As a parent/carer of the child named above I give my consent for my child to participate in the St Patrick’s K-2 Ski Program 2016 and agree to delegate my authority to the staff and instructors involved.
• Teachers and instructors may take whatever disciplinary action they consider necessary to ensure the safety, wellbeing and conduct of the students as a group, or individually in the above mentioned activity.
• The information I have provided the school in relation to my child’s skiing ability is correct, to the best of my knowledge.
• I also authorise the teachers and instructors to obtain medical assistance which they consider necessary should an accident occur, and agree to pay all medical expenses incurred on behalf of the above student.
• I have updated any medical information regarding my child and have provided the school with any information that may hinder my child fully participating in 2016 K-2 ski program. I further authorise qualified medical practitioners to administer anaesthetic if such an eventuality arises.
• I confirm I have checked the Thredbo website as advised and the information I have provided about my child’s skiing ability is correct to the best of my knowledge.

Parent’s/Carer’s Signature: ______________________________ Date: __________________

K-2 SNOWSPORTS PAYMENT SLIP

I ______________________ ____ permit _______________ in Year ________
(Name of Parent) (Name of Student)

(Name of Student)
to take part in the 2016 K-2 Snowsports Program.

My child will be participating in the: □ 1 day program □ 2 day program □ YES, we have a Thredbo Season Pass

PAYMENT DETAILS: I enclose $_______ Cash/Cheque payable to St Patrick’s Parish School, Cooma, OR please deduct $_______ from my Visa/Mastercard No. _______ _______ _______ _______ _______ Expiry: ___ / ___

Cardholder Signature: ______________________________ Date: __________________

Please return the completed forms and payment to the school office by Monday 1 August 2016