Thursday 14th February, 2013.

Dear Parent or Caregiver,

CGHS Dance Company

Congratulations, your daughter has auditioned and been accepted into the CGHS Dance Company. Students who successfully audition have an obligation to commit to rehearsals and represent the school as a dancer. Below is some very important information we wish to outline to you.

REHEARSAL INFORMATION
The company will rehearse every Friday mornings from 7.30am – 8.30am in the Dance Studio at Cheltenham Girls High School. Students should wear the school sports polo and/or black singlet/t-shirt and the sports shorts and/or black leggings to rehearsals.

PERFORMANCE DATES
The CGHS Dance Company will perform at a variety of festival, eisteddfod and school based events during 2013. The following table lists proposed performance information for 2013. Some dates are TBC.

<table>
<thead>
<tr>
<th>Term</th>
<th>Date</th>
<th>Performance</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>Sat 4th May</td>
<td>Dance Star NSW Preliminary Final</td>
<td>Sutherland Entertainment Centre</td>
</tr>
<tr>
<td>2</td>
<td>Wed 5th June</td>
<td>MADD night 1</td>
<td>CGHS - School Hall</td>
</tr>
<tr>
<td>2</td>
<td>Fri 14th June (pm) and/or Sun 16th June (all day TBC)</td>
<td>Dance Star NSW State Final</td>
<td>Sutherland Entertainment Centre (Fri) Whitlem Centre, Liverpool (Sun – TBC).</td>
</tr>
<tr>
<td>2</td>
<td>Mon 17th June – Fri 28th June. * Specific dates TBC.</td>
<td>Sydney North Public Schools Dance Festival</td>
<td>Glen St Theatre - Frenches Forest.</td>
</tr>
<tr>
<td>2</td>
<td>Sun 21st July</td>
<td>Sydney Eisteddfod</td>
<td>Science Theatre - University of NSW</td>
</tr>
<tr>
<td>3</td>
<td>Wed 21st August</td>
<td>MADD night 2</td>
<td>CGHS - School Hall</td>
</tr>
<tr>
<td>3</td>
<td>Sat 17th &amp; Sun 18th Aug</td>
<td>Dance Star National Championships</td>
<td>Gold Coast Convention and Exhibition Centre Gold Coast, QLD.</td>
</tr>
<tr>
<td>3</td>
<td>Sat 31st Aug</td>
<td>RYDE Eisteddfod</td>
<td>RYDE Secondary College - Top Ryde.</td>
</tr>
<tr>
<td>3</td>
<td>Sat 7th or Sun 8th Sept * Date TBC.</td>
<td>The Hills Dance Spectacular</td>
<td>Pacific Hills Christian School - Dural</td>
</tr>
<tr>
<td>3</td>
<td>Mon 16th Sept – Fri 20th Sept * Specific dates TBC.</td>
<td>State Dance Festival</td>
<td>Seymour Centre - Chippendale.</td>
</tr>
</tbody>
</table>
CHOREOGRAPHY
CGHS dances will be choreographed by Miss Samantha Parkinson, the Dance Teacher, in conjunction with the students during 2013.

YEARLY COMPANY FEES
Their will be no cost involved for training although, costs will be required for costumes, transport to and from auditions and eisteddfod entry fees. These costs have been accumulated into a yearly company fee of $90.00 which is payable to the front office by Friday 15th March, 2013.

PUBLICITY AGREEMENT
For publicity purposes your daughter will be photographed and/or videoed during rehearsals and whilst performing on stage. At Dance Festivals and Eisteddfods, professional photographers and videographers will be present. Parents please acknowledge if you agree or do not agree to this on the contract agreement slip/ Please be aware that if you do not agree, your daughter will not be able to participate in the dance company.

PARENT CONTACT DATABASE
The school appreciates that it is helpful for parents to communicate with other parents in regards to travel plans to and from events. By law, the school cannot supply your details without prior consent. If you wish to have your details made available to other parents in the CGHS Dance Ensembles, please provide contact details on the permission slip attached to this letter.

If you have any questions regarding the Extra-Curricular Dance at Cheltenham Girls High School, please contact Miss Samantha Parkinson in the PDHPE Faculty.

Yours sincerely,

Miss Samantha Parkinson
Dance Teacher/Coordinator

Mrs Suellen Lawrence
Relieving Principal
PLEASE SIGN, RETURN AND PAY TO THE CASHIER BY FRIDAY 15TH MARCH, 2013.

STUDENTS TO SIGN
I (students name) _______________________________ of roll call _________ (please indicate) wish to be a member of the CGHS Dance Company. I understand that it is my responsibility to approach class teachers to catch up on missed work, if I have an audition/performance commitment. I am aware that being a member of the ensemble requires that I attend rehearsals during Friday mornings from 7.30am – 8.30am and am willing to commit to this.

Signed (student): __________________________________________ Date: __________________________________________

PARENT TO SIGN
• I am aware that it is my daughter’s responsibility to catch up on work missed if absent from classes due to ensemble audition/performance commitment.
• I acknowledge the $90.00 contribution levy and understand it is due by Friday 15th March, 2012 and payable to the front office. I understand this levy covers bus transfers to and from auditions, eisteddfod entry fees and costume hire and maintenance from the school during 2013.
• I give permission for my daughter to attend Dance rehearsals. I understand that my daughter will be supervised by Miss Parkinson every Friday morning from 7.30am- 8.30am in the dance studio.
• I give permission to the taking of photographs and video of my daughter during rehearsals and at performances.
• I allow the following details to be shared on the parent contact database with other parents in the Dance Ensembles at the school. My details are;

Parent name/s: ____________________________________________________________________________________________________
Parent/s email/s: ____________________________________________________________________________________________________
Phone number/s: ______________________________________________________________________________________________________

Signed (parent): _______________________________________ Date: __________________________

List existing medical conditions or illnesses for your daughter (include asthma, diabetes, epilepsy, allergies etc.). Please outline the treatment for each. *include ‘Action Plan’ where necessary

………………………………………………………………………………………………………………………………………………………………………………
………………………………………………………………………………………………………………………………………………………………………………
………………………………………………………………………………………………………………………………………………………………………………

PLEASE INDICATE:  CASH □  CHEQUE □  CREDIT CARD □

STUDENT NAME: ______________________________  ROLL CLASS: ____________

PARENT SIGNATURE: ___________________________ DATE: _________________

AMOUNT: $90.00

TO BE COMPLETED IF PAYING BY CREDIT CARD: - DO NOT DETACH THIS SECTION FROM PERMITTISON NOTE.

STUDENT: ______________________________  ROLL CALL__________________

Visa □  Mastercard □

Name appearing on the card: ________________________________

□□□□ □□□□ □□□□ □□□□ □□□□ □□□□ □□□□ □□□□ Expiry Date □□□□□

Signature of Cardholder ___________________________ Date: ____________________

Amount: $90.00