

**Heathridge Primary School**

55 Channel Drive, Heathridge WA 6027

Phone: 08 9233 8950

Email: heathridge.ps@education.wa.edu.au



**Heathridge**  
Primary School

Dear Families,

We are excited to announce that Heathridge Primary School will be participating in the fantastic Edu-Dance program again this year. The program involves students from Years Pre-Primary to Year 6. The program will commence on Wednesdays, beginning on **Wednesday, February 7, 2024 ( Week 2, Term 1)**.

Edu-Dance is a creative dance program that provides children with the opportunity to have fun and promote fitness. The program covers many aspects such as coordination, musical appreciation, self-confidence and gives many children the opportunity to experience the excitement of performing in front of an audience. The children will perform for parents at the end of Term 1 on Wednesday, March 27, 2024, to showcase their talents. Information regarding the performance will follow closer to the date.

The cost this year is **\$37.00** per child for the program. The whole amount is due to be paid by Monday, February 12, 2024 ( Week 2, Term 1) for your child to participate in the weekly lessons. We understand that the beginning of the school year incurs many costs, so if you need to discuss payments or a payment plan, please contact the ladies in the office.

You can pay in cash, over the phone with your credit card, by direct deposit (please see bank account details on the money envelope) or by EFTPOS at the office. Please return the slip below with payment in the attached envelope to the office and place it in the allocated drop-off box in the office. Payments need to be made by **Monday, February 12, 2024 ( Week 3, Term 1)**

If you have any questions, please do not hesitate to contact me in the office at your convenience.

Kind regards,

Mrs Rachael Terry-Short  
Associate Principal



**EduDance 2024**

Please return this permission slip no later than Monday, February 12, 2024.

I give permission for my child \_\_\_\_\_ in Room \_\_\_\_\_ to participate in the EduDance program.

Parent/Caregiver Name: \_\_\_\_\_

Parent/Caregiver Signature: \_\_\_\_\_