

**DIVISION HOT SHOTS FINALS**

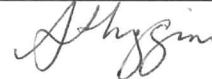
**Date:** Monday 23rd October, 2017  
**Venue:** Boronia Tennis Club  
**Time:** 9.30am – 2.30pm  
**Cost:** Free  
**Transport:** Walking from Wattleview to Boronia Tennis Club

We will depart 9.05am and will return by 3.00pm.

**Elaine Wilson**  
**Principal**

  
✂✂✂.....

**Andrew Higgins**  
**Sports Co-Ordinator**



**WATTLEVIEW HOT SHOTS TEAM**

I give permission for ..... of grade .....

to attend the **Division Hot Shots Finals on Monday 23rd October 2017**. In the event of injury or illness, I authorise the Principal or teacher in charge of the excursion to consent, where it is impracticable to communicate with me, to the child receiving such medical or surgical treatment as may be deemed necessary by a qualified medical practitioner and I agree to pay for any costs incurred.

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**Parent / Guardian Signature**

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**Parent / Guardian Name**

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**Emergency Contact Phone Number**.....