



GRADE 2,3 & 4 - MATHLETICS & READING EGGSPRESS (19/02/2024)

Dear Parent/Guardian

An event, GRADE 2,3 & 4 - MATHLETICS & READING EGGSPRESS, has been planned for Monday, 19 February 2024.

Over a number of years our school has utilised Mathletics and Reading Eggspress to support our classroom programs and provide opportunity for students to reinforce their skills at home. We will be utilising these programs in 2024.

Both Mathletics and Reading Eggspress are web-based programs that offer an array of activities, games and challenges. They are designed to encourage independent learning and the development of critical mathematics and literacy skills aligned to our curriculum. These learning resources are used in the classroom and can also be utilised by parents to support homework opportunities.

COST: \$30.00 - this is for your child's involvement in both programs for the year.

(This is a school based offer and provides significant discount for families).

Please Note: *The amount you need to pay may be less than the activity cost or even zero.*

If you have a family credit available, when possible this has already been deducted from the amount to be paid below.

If you have enough credit to cover the full amount, you won't have to pay anything below, you will just need to give consent.

DUE BY: Friday 16th February

PLEASE NOTE: ONLY upon receipt of payment will your child be registered for Mathletics and Reading Eggspress for 2024. They will be issued with a Username and Password providing them access to the websites.

If you have any further questions, please contact your child's teacher.

Yours sincerely,

Michelle Sanders
Assistant Principal

Date/Time/Venue: Monday, 19 February 2024 (9:00 AM to 3:30 PM), Classrooms

Staff member in charge: Michelle SANDERS

Cost: \$0.00, due by Friday, 16 February 2024

Consent: Required, due by Friday, 16 February 2024

Consent can be provided online through your school's parent portal (<https://apolloparkps-vic.compass.education>), or alternatively by returning the form below to Classroom Teacher.

Please Note: - ONLY Complete Medical Details or Emergency Contact Numbers below, if they are DIFFERENT from the parent contact details listed below. Please DO NOT enter 'N/A' or 'None'. Please leave these fields BLANK, if there is no change to the contact information or no additional or current medical conditions to add.

Apollo Parkways Primary School

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Consent Form for Compass Support (JDLF)

I give permission for Compass Support to attend this event. Where the staff member in charge is unable to contact me, or where it is impracticable to contact me, I authorise the staff member in charge to administer such first-aid as the staff member in charge judges to be reasonably necessary. I understand that this is an official school event and that Compass Support will adhere to the dress code, as outlined above, and behave in alignment with the school's code of conduct. I agree to meet any medical expenses and/or transport costs incurred in the event of sickness or injury. Further, I agree to meet any transport costs should my child be sent home as a result of misbehaviour or inappropriate conduct.



Details of allergies and/or medication currently being taken:

[Empty rectangular box for allergies and/or medication]

Emergency Phone Numbers:

Parent A Phone Number _____ Parent B Phone Number _____ Guardian Phone Number _____

Parent/guardian signature (consent/agreement): _____ Date: ____/____/____

Due 16/02/2024



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