

Holsworthy High School

"Be The Best You Can Be"

Huon Crescent, Holsworthy NSW 2173 Telephone: (02) 9825 2888 Email: holsworthy-h.school@det.nsw.edu.au

Dear Parent/ Guardian,

Commencing Term 2 Week 2, Thursday 9th May 2024, and continuing Thursday afternoons for the remainder of the year, the Visual Arts Faculty will be running a CAPA Club from 3.00pm to 4.00pm.

The CAPA Club will provide the students at Holsworthy High School the opportunity to become engaged in preparation for Holsworthy High School Events. Students will be encouraged to work as a team that will be involved in different activities to ensure a smooth-running production for events like our Holsworthy High Showcase evening. Students will be involved in hanging art exhibitions, costume and props design, backstage and front of house duties.

Students will be required to wear school uniform and comply with the usual school rules so that everyone can learn in a safe space.

Students will need to make their own way home on Thursday afternoons when CAPA Club concludes at 4.00pm.

The teachers running the CAPA Club will be Ms Booker and Ms Borda.

Ms Rowena Booker – CAPA coordinator and Organising Teacher

The CAPA Club will only run if Ms Booker and Ms Borda are available. If the CAPA Club is unable to run students will be notified ASAP via a message on Sentral. On these rare occasions your child will need to make arrangements to go home at the end of the normal school day at 3.00pm.

The Visual Arts Faculty are looking forward to working with our students with the aim to get creative and to enjoy supporting our CAPA events at HHS.

Yours Sincerely,

Please detach and return the completed CONSENT FORM to the Visual Arts Faculty before attending.

CONSENT FORM

I give permission for	of roll call class	to attend
CAPA Club to be held in the Visual Arts Block and	d Art Quad at Holsworthy Hi	gh School on Thursday
afternoons from 3.00pm – 4.00pm		

*I have read and understood all details surrounding this school activity outlined in the accompanying note.

Parent/	Guardian	signature:	Date:	
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