



ADDRESS | 45 Knighton Road, Hamilton, 3216

PHONE | (07) 856 5399

WEBSITE | www.kns.ac.nz

PRINCIPAL | Andrew Campbell PGDip. Org. Behaviour, B.Ed., Dip.T.

Tuesday, 31st May 2022

Junior Tough Guy and Gal Challenge - PERMISSION AND PAYMENT NOTICE

This is a very popular event and is open to the first 100 year 5 or 6 students who pay and register.

This event will take place at Ngaruawahia Christian Camp on Wednesday, 29th June. This is a 3km off-road fun event where children can run an obstacle course through the mud. Children are to dress in old clothes or even costumes and could get together with friends to decide and design what to wear. *It is important that children are able to change themselves without assistance after their shower following the event.*

The cost of the event is \$30 per student. Transport to and from the event is by bus at no extra cost.

For your ease, it is suggested that you complete payment and the permission form online through the Kindo shop (www.mykindo.co.nz). Alternatively you can complete the slip below pay via eftpos at the school office OR place cash in an old envelope with the completed slip and return it to the Frog Box at the Smiley Face Window. Registrations will close once all places are filled. In the past this event has sold out on the first day of registrations.

There is a limited number of students that we can take and there are no refunds once your registration is accepted.

If you have any questions or queries, feel free to contact David Hannah on the contact details below.

David Hannah | dhannah@kns.ac.nz

Junior Tough Guy and Gal Challenge Permission

If you pay through Kindo, you do not need to return this slip.

PLEASE PRINT CLEARLY and deliver to the Frog Box at the Smiley Window

I give permission for my child _____ Rm _____
to travel by bus and participate in the Junior Tough Guy and Gal Challenge at Ngaruawahia Christian Camp on Wednesday, 29th June

\$30 enclosed / paid by eftpos

Name of parent/caregiver: _____

Signature of parent/caregiver: _____

Parent/caregiver contact telephone: _____

Parent/caregiver email address: _____

Room Number	Year Level	Surname	First Name	DOB	Gender

