24th February, 2016

Dear Parent/Guardian,

Year 11 and 12 Visual Arts
Contemporary Painting Workshop

Date: Friday, 11th March, 2016
Where: Xavier Catholic College – RA1 and Art Courtyard
Time: 9.00am – 3.20pm
Uniform: Full College uniform plus protective shirt/apron
Cost: $12.00

A contemporary painting workshop is being held for Year 11 and 12 Visual Arts students in Week 7 on Friday, 11th March. All Year 11 and 12 Visual Arts students are required to participate in this artmaking workshop. The artist Kate Hallen is a practicing Visual Artist and Honours graduate who majored in the studio area of painting. She will expertly guide students with oil and acrylic painting techniques with various mediums. The knowledge gained from this experience will contribute to the students own practice and Bodies of Work for assessment.

The whole day workshop will provide a valuable opportunity for students to make significant progress using specific techniques in painting for their Body of Work. These techniques require processes that take extended lengths of time and steps to complete the works beyond the usual single 45 minute or double lessons. Miss Schaeffer and Miss Rogers will provide assistance and supervision.

Students will attend homeroom in the morning and have their usual breaks at recess and lunch.

If you have any questions regarding the painting workshop, please contact Miss Schaeffer at the College.

Please return the permission note to the College Office by Friday, 4th March, 2016.

Yours sincerely,

Mrs L. Hunt
Leader of Creative Arts

Miss B. Schaeffer
Year 12 Visual Arts Teacher
Please return the permission slip, with payment, to the College Office by Wednesday, 4th March, 2016.

Year 11 and 12 Visual Arts
Contemporary Painting Workshop

Student’s Name: ___________________________ Homeroom: ________

I give permission for my son/daughter to attend the Contemporary Painting Workshop for Year 11 and 12 Visual Arts students on Friday, 11th March, 2016 to be held at the College.

Enclosed: $12.00

Parent/Guardian Signature: ___________________________ Date: ______________

Parent/Guardian Name (please print): ______________________________________

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CREDIT CARD PAYMENT

Card Number ___________________________ Expiry Date ___________ / ______

Card Name ____________________________________________ Amount Paying $_______