



St John Vianney's Primary School

ABN 33 128787 705

Namatjira Drive
WARAMANGA ACT 2611

Telephone: 02 6288 2383

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Email: office.sjv@cg.catholic.edu.au

Web: www.sjv.act.edu.au



St Vincent de Paul SJV School

Winter Sleepout

Dear students, parents, carers and families,

This year SJV are going to have a winter sleepout to support the St Vincent de Paul Society. There are 116,000 Australian's experiencing homelessness and a third of these are under 25 years of age. In the ACT, 1600 people are experiencing homelessness with 18% under 18 years old. By sleeping 'rough' for one night, this sleepout gives students a tangible experience of what it would be like to experience homelessness.

The details for this event are as follows:

Date/Time: 5pm Friday 17th August to Saturday 18th August 8am

Place: SJV School Hall

Cost: Totally up to you! On the night we will collect donations from families with all money raised donated to St Vincent de Paul.

Food: Soup and Bread Rolls for dinner. Tea, Coffee and Hot Chocolate provided.

Breakfast BBQ on Saturday morning at 7:30am.

Supervision: SJV Staff will be in attendance. However, students **MUST** be supervised by a parent or a designated adult for the entirety of this event, who is over the age of 18 and holds a current WWVP card.

On the night we will have a guest speaker, play some games and watch a movie together. Please bring along your own sleeping bag, cardboard to sleep on, pillows etc.

If anyone is willing to cook and or/provide soup please fill in the form below. SJV staff will provide and cook breakfast on Saturday morning, parents are also welcome to assist.



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If you are interested in attending please fill in the slip below. Please contact me if you have any questions on 62882383 or ryan.matchett@cq.catholic.edu.au. More information will be provided as we get closer to the event.

Kind regards,

Ryan Matchett

Acting Religious Education Coordinator

Please return this form to the front office by Friday 3rd August.

The _____ family will be attending the SJV Winter Sleepout on Friday 17th August from 5pm.

Number of People Attending: _____

My child is attending and will be supervised by: _____

WWVP Card Number: _____

I am able to provide (Please circle): Soup or Bread rolls

I can assist with setting up/serving dinner:

I am able to assist cooking breakfast on Saturday 18th August from 7:00am

Food allergies (Please List): _____

Medical Information (Asthma, medication etc): _____

Parent Name: _____ Parent Signature: _____

Email: _____ Phone Number: _____