



Evatt School Swimming Carnival - Year 2-6 and ANT/PS **6 March 2020**

To parents and carers,

14 February 2020

On Friday 6 March Evatt School will be relocating to the Gungahlin Leisure Centre (GLC) for the school swimming carnival. Parents/carers will need to make their own arrangements for the day if their child is not attending this carnival. The purpose of this event is to select an Evatt School team for the Belconnen District Swimming Carnival. Students in Years 2-6 and ANT/PS will participate in swimming events ranging from 25m-200m, followed by novelty activities. When students are not competing in pool events, they will be in their house groups cheering and supporting their team. All students who wish to participate in any swimming event will need to complete and pass the Royal Life Saving Society Survival Challenge Proficiency Test which will be conducted before the races begin. Students who do not participate in, or pass, the proficiency test (http://www.sports.det.nsw.edu.au/spguide/aquatic_activity/dvd.php) will not be able to enter the 50m pool. They will complete their novelty events in water no higher than their hip in the small pool and grassed areas only.

Students are encouraged to dress in their house colour and will also need to ensure they bring appropriate swimming apparel, towel, sun-smart hat, water bottle, sunscreen (to be applied for outdoor activities) and a jacket or something to keep warm between races. Students will not require money, as they will not be allowed to go to the canteen. Children are not allowed to bring crepe paper, zinc or coloured hair spray, as these react to the chlorine in the pool.

This Activity:	Evatt School Swimming Carnival
Date of the Activity:	Friday 6 March 2020
Start or Departure Time:	Students will be leaving Evatt School at approximately 9:15am
Return or Finish Time:	Students in Years 2-6 and ANT/PS will leave GLC at 2:15pm
Cost:	\$12.00
Due by:	Friday 28 February 2020

Please complete the permission slip and ACTDET Swimming Pool and Water Park Based Aquatic Activities Medical Information and Consent Form and hand it to the front office no later than **Friday 28 February with your payment.**

If you are able to help on the day please email Jenelle Martin at jenelle.martin@ed.act.edu.au. Should you need to contact your child on the day please phone GLC on 6241 1132.

Thank you,

Jenelle Martin
Swimming Carnival Coordinator

The school has made every effort to keep costs for this activity at a reasonable level. We have an equity fund which can be used to provide financial assistance for students where parents are unable to make the requested contribution. If however, there is insufficient total funding available to meet the cost of the excursion, regrettably we may not be able to proceed.

Staff accompanying students on excursions will take all reasonable care while supervising students to protect them from injury and to control and supervise their behaviour and activities. Parents should be aware that staff are not responsible for injuries or damage to property which may occur on an excursion where in all circumstances staff have not been negligent. Parents should warn children of the risk to themselves, to others and to property of impulsive, wilful or disobedient behaviour.

PERMISSION AND PAYMENT DETAILS

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Please return this form & payment to Evatt School by Friday 28 February 2020

Child's Name _____ Year of Birth _____

Class _____

- I have enclosed cash I have paid by Direct Debit I wish to pay by credit card and my details are below
- I agree to my child taking part in swimming/aquatic activities associated with this program/excursion.
- My child will **NOT** be attending the Evatt School Swimming Carnival.

My child can swim No Yes

Distance my child can swim confidently Less than 10m 25m 50m More than 100m

The information that you provide will assist to provide a safe environment for your child's participation in swimming/aquatic activities. Please describe your child's swimming ability, e.g. water confidence, swimming strength, distance (swimming continuously) and ability to tread water.

Please list any special requirements necessary for your child to participate in swimming/aquatic activities.

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- I authorise for the teacher in charge to make arrangements for the welfare of the student (including medical or surgical treatment) in an emergency.
 - I agree to meet the costs associated with any emergency arrangement made by the teacher in charge – free ambulance transportation only applies in the ACT.
 - I agree that the students will be under the authority of the school for the duration of the excursion, and that the teacher in charge is authorised to return the student to school, at the expense of the parent/guardian, if the teacher in charge considers that circumstances warrant such action and after contacting the parent/carer.
 - If my child's behaviour presents an OH&S issue at the activity, or when travelling, I understand that he/she may be excluded from the program, and that his/her participation may need to be negotiated.
 - I agree to my child taking part in swimming/aquatic activities associated with this program/excursion.

Parent/guardian Signature: _____ Date: _____

Parent/guardian Name: _____

For Direct Debit payment:



Account Name: Evatt Primary School Management Account
BSB: 032777
Account number: 001244
Reference: <your child's surname> <GL8004>

Cash/Direct Debit

AMOUNT ENCLOSED:

For credit card payment:

CREDIT CARD VISA: MASTERCARD:

Card no: ____/____/____/____ Amount: _____ Expiry Date: ____/____

Name of Cardholder: _____ Signature of Cardholder: _____