

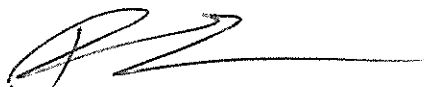
SUTHERLAND ZONE SWIMMING CARNIVAL 2020

Excursion INFORMATION

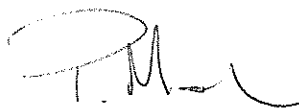
Please complete and return the attached consent form to the administration office by the Friday 28 February.

Dear parent/guardian,

- Congratulations your child has been selected to represent the school in swimming at the Sutherland Zone Swimming Carnival, being held at SUTHERLAND LEISURE CENTRE on Monday 2 March 2020.
- Venue: Sutherland Leisure Centre, Rawson Ave, Sutherland.
- Travel will be by Bus, leaving the school at 8am and returning at 2:45pm. Students are to meet Mrs Noble in the quad at 7:55am.
- The cost of the excursion is \$18 per student which includes a school swimming cap, bus travel, entry to the pool and the Zone Levy. Permission notes and money are to be returned to the Administration Office by Friday 28th of February, 2020.
- Accompanying staff are: R.Ellis, N.Noble, N. Breen
- Sport Uniform is to be worn and students are advised to bring plenty of water, food, a swimming towel and sun protection (ie, hat, protective clothing, sunscreen etc).
- This event will involve the following water or swimming activities: Zone Carnival events. A list of events for all students and the carnival program are both attached. Please note all strokes except for freestyle are swum over 100m at Zone. If any students wish to submit times for 800 Freestyle & 400 metre events please see Mr Ellis prior to the carnival. Details are on the program attached.
- The contact number during the excursion is 0403 869 998.



R.Ellis
Sport Coordinator



Mr P.Marsh
Principal

Permission Note for SUTHERLAND ZONE SWIMMING CARNIVAL 2020 on Monday 2 March 2020

Please complete and return this consent form to the administration office by the Friday 28 February.

CONSENT

I hereby consent to in Year participation in an excursion to SUTHERLAND LEISURE CENTRE on Monday 2 March 2020.

SPECIAL NEEDS

Special needs of my child which you should be aware (eg. allergies, medication - please provide full details)

MEDICAL

I give permission for my child to receive medical treatment in case of emergency. YES / NO (please circle)

SWIMMING

In relation to the proposed water or swimming activities, I advise that my child is a: (please tick one)

strong swimmer average swimmer poor swimmer non-swimmer

- I advise that my child requires the following flotation device to assist him/her in the water:.....
- I undertake to provide this device so that my child can participate in the excursion. Yes / No
- I give / do not give permission for my child to participate in the water or swimming activities.

Signature of Parent/Guardian

Name of Parent/Guardian

Date

Privacy Advice

The information provided on this consent form by the parent or caregiver is being obtained for the purpose of conducting a school excursion detailed above. It will be used by the NSW Department of Education for seeking consent for the child to undertake activities within this excursion activity. Provision of this information is required by law / voluntary. It will be stored securely. You may correct any personal information provided at any time by contacting the school on 9521 3244

PAYMENT

Payment for SUTHERLAND ZONE SWIMMING CARNIVAL 2020. Student Name: _____

I have made a payment online of \$18 for this excursion.

For online payments please go to the school's website at <http://web1.gymea-h.schools.nsw.edu.au>

You will need to indicate your child's first name, last name, date of birth and the Ref. or Invoice Number.

Ref. or Invoice Number: **6-3-SUTHERLA** Amount: **\$18**

Please debit my credit /debit card for \$18 for this excursion.

Credit Card Number:

Expiry Date: ____ / ____ CSV Code on back of card:

Name on Card: _____ Your Signature: _____

I have made a payment at the school office of \$18 for this excursion.