



Dear Parent/Guardian

On Wednesday 28<sup>th</sup> February 2018, the students from years 4 to 6 (with select year 3's) will be travelling to Claremont Pool to participate in the Faction Swimming Carnival. Could you please return the permission slip below to enable your child to participate in the carnival.

Please retain this information and return the consent form (opposite) by Monday 19<sup>th</sup> Feb 2018.

VENUE: Claremont Pool 50 metre outdoor pool.

DATE: Wednesday 28<sup>th</sup> Feb 2018

TIME: 9.30- 12.30pm

TRANSPORT: Bus

COST: \$8.00 (bus fare and pool entry)

DRESS: Children must wear bathers/boardies and have a pair of goggles. "Rashies" are encouraged. Please pack their school uniform to change into after the carnival. Wear HAT and sunscreen. Please label everything.

ITEMS REQUIRED: Please put sunscreen on before leaving home. Recess food, snacks and a water bottle.

SUPERVISION Classroom teachers and administrators will be attending the carnival.

NOTE: Staff accompanying students on excursions will take all reasonable care while the students are in their charge to protect them from injury and to control and supervise their behaviour and activities. Parents/guardians should be aware that staff members are not responsible for injuries or damage to property which may occur on an excursion where, in all circumstances, staff have not been negligent. Costs incurred as a result of accident or illness are the responsibility of the parent/ guardian. Parents are required to inform the organisers well before the scheduled excursion departure of any change to their child's health and fitness so that appropriate supervision may be arranged. Where it is considered necessary, school staff will arrange medical assessment and treatment for students. Should you have any queries, please do not hesitate to contact me/ the teacher in charge of the excursion on 9381 1655 or via email.

Mrs Ali Cook
Physical Education teacher
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Mrs Lisa Wade
Associate Principal

FACTION SWIMMING CARNIVAL PAYMENT METHOD
Students from Years 4 to 6, and selected Year 3 - \$8 per student

Child's name: Teacher:

My child will be participating in the Faction Swimming Carnival on Wednesday 28<sup>th</sup> February 2018.

Please:-

Debit my child's school based account. (PLEASE ENSURE SUFFICIENT FUNDS).

I enclose \$ (Please bring cash directly to the office. No change will be given. A credit will appear on your statement).

Direct deposit and Credit Card payment is not available for costs under \$15.

The following options are available to top up your student based account. We recommend a deposit of \$100.

- Direct bank deposit, Visa payment, Cash/ Eftpos
BSB: 036 044, Account No: 123672, Telephone 9381 1655 or call in at the office.



FACTION SWIMMING CARNIVAL 2018 CONSENT FORM

I have read and understood the information regarding the Faction Swimming Carnival on Wednesday 28<sup>th</sup> Feb and give my consent for my son/daughter to attend.

Child's name: Teacher:

Signature of parent/guardian Date

RETURN TO CLASSROOM TEACHER Monday 19<sup>th</sup> Feb 2018.

If you are able to assist (ribbons, judging etc) please email me directly: Lisa.Wade@education.wa.edu.au