



Sacred Heart Central School

Faith & Knowledge

Event	Western Region Swimming Carnival
Date of Event	16 th February 2018
Fees payable	Pool entry \$2.60 students, \$3.20 adult spectators - payable at the pool gate. Nomination fee \$8.00 payable to the school with permission form.
Venue	Lake Cargelligo Memorial Swimming Pool
Venue Address	9 Willandra Street, Lake Cargelligo
Time of departure	6:00am
Time events commence	9:15am
Time students are expected at the venue	8:40am
Students to meet	Sacred Heart Tent
Transport	Private car
Uniform	Full Sacred Heart Sports uniform on arrival
School to provide	Tent, sunscreen, flag, first aid kit
Students to bring	Own swimming gear
Canteen available	Yes
Teachers attending	Mrs Patrece Maxwell
Special instructions	Pool opens for warm ups at 8:30am.
Expected event finish time	2:30pm approximately
Return to school	5:20pm approximately

**Permission slip and money to be paid to the front office by Monday 12TH February 2018.
Failure to return by the due date may mean that students cannot attend the event.**

Maxwell
Mrs Patrece Maxwell
Sports Coordinator

Janet Cartwright
Mrs Janet Cartwright
Principal



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PLEASE RETURN THIS PAGE with any required money to the Front Office in a blue payment envelope by Monday 12th February 2018

CONSENT FORM

As a parent/guardian of _____ Class _____, I give my consent for him/her to participate in the **Western Region Swimming Carnival 16/2/18** and agree to delegate my authority to the staff and instructors involved. I understand that teachers will take whatever disciplinary action is needed to ensure students' safety and the orderly conduct of the excursion. If the above student must be returned to the school due to inappropriate behaviour I will meet the cost of transport.

I authorise teachers to seek medical attention if needed while on excursion and agree to pay any medical expenses incurred on behalf of the above student.

Signed: _____

Parent/Guardian

STUDENT COMMITMENT

I agree to meet the expectations of this excursion and to follow the instructions of the teachers. I will be of good behaviour throughout the excursion.

Signed: _____

Student

Travel Arrangements

My Child's Name _____

My child will need transport arranged for them YES NO

I _____ (name) can provide transport to the **Western Region Swimming carnival 16/2/18** YES NO

My current driver's licence number is _____
(**Learner and provisional drivers are not permitted to transport students.**)

My current vehicle has the following number of lap/sash seat belts available _____
(**Do not count front seat if vehicle is fitted with an air bag if student is under 12 years.**)

I have comprehensive insurance YES NO
(Must have comprehensive car insurance.)

I have submitted to the front office my Working with Children Check. YES NO

I can assist with timekeeping. YES NO

Signed: _____

Parent/Guardian