

## **2023 School Swimming Carnival - Competitors Only**

Dear Parent/Guardians,

Our swimming carnival will be held on Wednesday, 15 February 2023 for **competitors only** for students from years 3-6 and year 2 students turning 8 years old this year.

Students attending must be willing to represent their school at the next level if successful.

### ***Only students competing in events to attend***

- Students must arrive with their swimming clothes underneath their sports
- Kiosk is not available to students

Please note it is a normal school day and the expectation is that all students not competing in the carnival will attend school as normal.

Payment for this excursion and a signed permission note needs to be returned to the school as soon as possible. *Late payments will not be accepted.*

**Date:** Wednesday, 15 February 2023

**Where:** The Gordon Fetterplace Aquatic Centre Bradbury - The Pkwy, Bradbury

**Transport:** Bus to and from the pool      **Time:** Depart KPS at 9:15 am and return at 2 pm

**Cost:** \$12

**What to wear:** Sports Uniform with swimmers underneath

**What to bring:** Water resistant sunscreen, sun-safe hat, towel, lunch, recess and a drink in a labelled bag. NO GLASS.

**Parent Helpers:** Parent helpers would be greatly appreciated. Please indicate if you are able to assist staff.

Please contact the office should you require any further information.

Ms Woods  
**Assistant Principal**

Ms Phillips  
**Principal**

## PERMISSION NOTE:

2023 Swimming Carnival Competitors ONLY – Please return as soon as possible

I give permission for my child \_\_\_\_\_ in class \_\_\_\_\_ to participate in the 2023 Swimming Carnival – Competitors only on Wednesday, 15 February at The Gordon Fetterplace Aquatic Centre Bradbury

- My child can swim 50 metres competitively
- I understand that my child will travel by bus and will return to school by 2:30pm
- I enclose \$12.00 cash to cover the cost of the event OR
- I have made payment online. Receipt Number \_\_\_\_\_

Contact Name \_\_\_\_\_ Signature \_\_\_\_\_

Contact Phone Number \_\_\_\_\_ Date \_\_\_\_\_

Does your child suffer from asthma? Yes/No (If yes, please ensure medication is taken)

\_\_\_\_\_

Does your child suffer from any allergies or any other medical conditions? Yes/No  
(If yes, please explain)

\_\_\_\_\_

\_\_\_\_\_

Does your child need to take medication for a medical condition?  
Yes/No (If yes, please provide details)

\_\_\_\_\_

\_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian

I am able to assist at the carnival on the day

Name \_\_\_\_\_ Phone \_\_\_\_\_