DISTRICT SWIMMING SPORTS  
WEDNESDAY 19th FEBRUARY, 2014  
AQUARENA SWIM CENTRE

Dear Parents/Guardians

Your child has been selected to represent Wattle Park PS at the Box Hill District Swimming Trials. This carnival will be conducted at Aquarena in Doncaster (Melways Ref 33 E9) on Wednesday 19th February, 2014 from 10:00am–2:00pm. All children will be travelling to and from the venue by private motor vehicle. Your child will be travelling in a vehicle driven by.....................................................Registration number.............................You may, of course, choose to take your own child to the event. We will be leaving for the pool at approximately 9:00 am so all competitors will need to at school by 8:40 for a short briefing. They will need to take along a packed lunch including a named water bottle. Please ensure your child has a towel, bathers, wide brimmed hat, sunscreen and any personal medication (e.g. ventolin). It may also be beneficial to pack a pair of thongs and a warm change of clothes in case of cooler weather. All competitors will be charged $5.00 to cover entry fee and organizational costs which should be given to their class teacher.

*** Please note that should your child win their event they will qualify to

participate in the Whitehorse Division Swimming Trials to be held one week later on Thursday 27th February at the Nunawading Aquatic Centre. It will be the responsibility of parents to arrange transport to this event.***

Melinda Downes  
Sports co-ordinator

Gayle Cope  
Principal
Box Hill District Swimming Carnival 2014 Permission Forms

Form A to be taken on excursion.

I give permission for my child ___________________________ Grade _____ to attend the Box Hill District Swimming Carnival to be conducted at Aquarena, Doncaster on Wednesday 19th February 2014 and to travel by private vehicle __________________________ driven by __________________________. I authorise the teacher in charge of the excursion to consent where it is impracticable to communicate with me to my child receiving such medical or surgical treatment that may be deemed necessary in the event of an emergency.

Signed __________________________ Contact Number ________________

Form B to be retained at school.

I give permission for my child ___________________________ Grade _____ to attend the Box Hill District Swimming Carnival to be conducted at Aquarena, Doncaster on Wednesday 19th February 2014 and to travel by private vehicle __________________________ driven by __________________________. I authorise the teacher in charge of the excursion to consent where it is impracticable to communicate with me to my child receiving such medical or surgical treatment that may be deemed necessary in the event of an emergency.

Signed __________________________ Contact Number ________________