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**DISTRICT SWIMMING SPORTS
THURSDAY 16th FEBRUARY, 2017
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, located on Williamsons Road, Doncaster on **Thursday 16th February, 2017 from 9:45am–2:00pm.**

All children will be travelling to and from the venue by private motor vehicle. If you are available to drive your child and other children to the venue please tick the following box:

(In which case you will need to provide details of your car's comprehensive insurance to Mr. Walshe and Ms. Gayle Cope)

We will be leaving for the pool at approximately 9:00am so all competitors will need to be at school by 8:40am for a short briefing. Wattle Park Primary School sporting top is to be worn. (If your child does not have their own, please approach Mr. Walshe) Please ensure your child has a **towel, bathers, wide brimmed hat, sunscreen and any personal medication (e.g. Ventolin or Epipen).** They will also need to take along a **packed lunch** including a named water bottle. 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** with this permission form.

****** Please note that should your child win their event they will qualify to participate in the Division Swimming Trials, with details to be sent out after the event. It will be the responsibility of parents to arrange transport to this event.******

Mr. Ashley Walshe
PE Sport Coordinator

Ms. Gayle Cope
Principal

Box Hill District Swimming Carnival 2017 Permission Forms

Form A to be taken on excursion.

I give permission for my child _____ Year _____ to attend the Box Hill District Swimming Carnival to be conducted at Aquarena, Doncaster on Thursday 16th February 2017 and to travel by private vehicle driven by staff or parents.

I authorize 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 _____ Year _____ to attend the Box Hill District Swimming Carnival to be conducted at Aquarena, Doncaster on Thursday 16th February 2017 and to travel by private vehicle driven by staff or parents.

I authorize 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 _____