



# MANLY WEST PRIMARY SCHOOL

GRIFFITH STREET, BALGOWLAH 2093

Tel: 9948 2257, 9948 1959

Fax: 9907 0342

Dear Parents/Carers,

February 23, 2021

Your child has been selected to represent Manly West in the District (Zone) Swimming Carnival at the **Warringah Aquatic Centre** on Friday, 5<sup>th</sup> March. The Carnival will commence promptly at **9 am** starting with the Medleys. Transport to and from the centre will be by bus. Your child must be present and ready at school by **8.15am** for a prompt **8.30am** departure.

Children will be seated in a Manly West team area and are to remain there until called for their particular race(s). This year, due to COVID-19, no parents/carers will be allowed to attend..

**The cost for all competitors is \$15.** This includes their entry fee and covers the hire of the venue and bus. Please send this money in an envelope, marked with your child's name and class to the office by Friday 26<sup>th</sup> February.

All competitors will **be required to wear a swimming cap**. The school has purchased some blue caps and they will handed out by Mr Turner at the pool. Swimmers should also take their recess, lunch, plenty to drink in a re-sealable bottle, a towel, hat, sunblock and their best behaviour! Make sure you bring a plastic bag for any wet gear.

Those who qualify for the Regional Carnival will be given a note at the event.

Please complete and **return the tear-off slip below, along with \$15.00 to the office by Friday, 26<sup>th</sup> February. Please ensure the correct amount is placed in the envelope as the office will not have change.**

Grant Turner  
Sports coordinator

Julie Organ  
Principal



## PERMISSION NOTE –DISTRICT SWIMMING– RETURN TO OFFICE

### **Privacy Advice:**

The personal information provided on this consent form will be used by the Department of Education and Training for general administration and communication and other matters of welfare relating to your child at this excursion. While the provision of this information is voluntary, it is strongly recommended that all details are completed. Failure to do so may impede the resolution of welfare issues if you are not able to be contacted. This information will be stored securely. You may access or correct any of the details at any time by contacting the school.

*I hereby consent to my child \_\_\_\_\_ in class \_\_\_\_\_ to represent Manly West in the District swimming carnival on **March 5<sup>th</sup>**. It is my responsibility to provide sunscreen for my child and to ensure that he/she understands that they need to reapply the sunscreen throughout the excursion. I am aware that some children in our school could have a severe reaction if they come in contact with nuts and will avoid sending nuts (or any bi-product) with my child*

***The cost for the carnival is \$15 and payable to the office.***

**Special needs** of my child of which you should be aware (ie: allergies, medication).

☐ Anaphylaxis    ☐ Asthma    ☐ Epilepsy    ☐ Diabetes

☐ other (please state) \_\_\_\_\_

☐ medication (please state) \_\_\_\_\_

☐ food requirements (please state) \_\_\_\_\_

### **Allergies**

☐ sun    ☐ grass    ☐ dust    ☐ pollen    ☐ insectbites

☐ allergy to the following medication/s: \_\_\_\_\_

☐ other (please state) \_\_\_\_\_

*Parents should ensure that all medication and action plans for student medical conditions are current and have been supplied to the school.*

***I am aware that transport to and from the event is by bus.***

**SIGNATURE of PARENT/GUARDIAN .....**

**DATE .....**