Dear Parent/s,

Your child has been selected to represent Gray Street P.S at the South West Division Swimming Sports in Portland (Portland Leisure & Aquatic Centre on Friday 6th March, 2015.

Students will need to wear their sports uniform, have sunscreen and hat and be prepared with all of their food and drink requirements for the day.

Students will be transported to the event by a parent. If you are unable to transport your child, please contact me at school. Mrs McGinley will be the teacher in charge on the day and will meet students at the Portland Leisure & Aquatic Centre.

The order of events at Portland will be as follows with a very rough time guide – it is the swimmers responsibility to be at the pool at least half an hour before their event.

Butterfly – 10am
Backstroke – 10.15am
Breaststroke – 11.00am
Freestyle – 11.45am (followed by a SHORT lunch break)
Freestyle Relays – 12.45am
Medley Relays – 1.30pm

Entry fees are $2.00 per event, please hand money to Mrs McGinley on the day. Your child is in the following highlighted events:

<table>
<thead>
<tr>
<th>EVENT</th>
<th>COST $2 PER EVENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Freestyle</td>
<td></td>
</tr>
<tr>
<td>Backstroke</td>
<td></td>
</tr>
<tr>
<td>Breaststroke</td>
<td></td>
</tr>
<tr>
<td>Relay</td>
<td></td>
</tr>
</tbody>
</table>

Please return the form to the office by Tuesday 3rd March.

Yours sincerely

Anthony Hill
2015 ZONE SWIMMING
return completed form to school

Student behaviour

‘I understand that in the event of my son’s/daughter’s misbehaviour or behaviour that poses a danger to himself/herself or others during the excursion, he/she may be sent home. I further understand that in such circumstances I will be informed and that any costs associated with his/her return will be my responsibility.’

ICT/Photograph consent

‘I agree to my child using the Internet and computer network in accordance with the same Internet student users agreement that applies at their current school.’ [Strike out if you do not consent]

‘I also consent to my child being photographed and/or visual images of my child being taken during activities by the school for use in the school’s publications, school’s website or for publicity purposes without acknowledgment and without being entitled to any remuneration or compensation.’ [Strike out if you do not consent]

Medical consent

Where the teacher-in-charge of the excursion is unable to contact me, or it is otherwise impracticable to contact me, I authorise the teacher-in-charge to:

• Consent to my child receiving any medical or surgical attention deemed necessary by a medical practitioner.
• Administer such first-aid as the teacher-in-charge judges to be reasonably necessary.

Consent for emergency transportation

‘In the event of an emergency I consent to my child being transported in a privately owned vehicle driven by a member of the supervisory staff listed above.’

Student accident insurance

The Department of Education does not provide student accident cover. Parents may wish to obtain student accident insurance cover from a commercial insurer, depending on their health insurance arrangements and any other personal considerations.

……………………………………………×………………………………………………×……………………………………………

ZONE SWIMMING 2015

STUDENTS NAME: …………………………………………..…       GRADE: ………………………………

Parent consent

I have read all of the above information provided by the school in relation to the 2015 Zone Swimming at Portland Leisure & Aquatic Centre including any attached material.

I give permission for my daughter/son_______________________________________ (full name) to attend.

Parent/guardian: ____________________________________________ (full name)

__________________________________________ (signature) _____________ (date)

In case of emergency I can be contacted on: __________________________

OR: __________________________