



5th February 2020

SWIMMING CARNIVAL - 2020

Friday, 21st FEBRUARY - TERM 1 - WEEK 3 - YEARS K-6

Dear Parents,

Our School Swimming Carnival is to be held at Phillip Pool on Friday of week 3 (21/2/2020), for all children in Years K-6. The carnival will commence at 9.30am for students in years 2-6, with the assessment of swimming competency first. The carnival will start directly after grading.

*****All students who wish to enter any of the pools must be assessed prior to swimming. Please ensure the attached permission slip is completed in respect of your child's swimming ability to the best of your knowledge. Please err on the side of caution.*****

Students in Years 2-6 will depart from school at 9:15am and students in K-1 will depart at 10:30am. K-1 will leave the pool at 12.45pm and Years 2-6 children will leave at 2.15pm. Essentially there will be two separate carnivals running at the same time: K-1 in the middle and small pool and Years 2-6 in the Olympic (50m) Pool.

Capable swimmers, who were born between 2007 - 2012, can compete in championship events (50m) which gives them the opportunity to represent the school at the regional carnival. For those swimmers that are unable to swim 50m with confidence, we run 25m races. Please let your child know that these races commence at the shallow end of the pool with no diving.

We will also have novelty events to encourage as many children as possible to get in and have some fun on the day. Priority for these novelty events will be given to non-race swimmers, and those children participating in a small number of races. These will be conducted in the shallower pool. Children in championship races (50m) cannot enter the 25 metre event for the same stroke. Novelty events will be prioritised for children who will compete in **2 or less 25m races**. This is to ensure that all children are able to participate equitably.

ALL CHILDREN ARE EXPECTED TO ATTEND AND PARTICIPATE TO THEIR LEVEL OF ABILITY

Children in Year 2 who are very capable swimmers, who were born in 2012 and who wish to swim in championship races need to indicate this on the nomination form.

Please supply your child with **sunscreen, a hat, towel, morning tea and lunch and a drink** in reusable containers. Canteen facilities will also be available for limited purchases on the day. Children can wear their swimwear under their sports uniform to school.

Pool admittance and return bus fares are covered by the Activities Levy. **For the purposes of accountability, we prefer that all children return to school from the carnival on the bus.**

Please note that parents and siblings entering the pool will have to pay an entrance fee.

Some long stay paid parking is available opposite the pool. **NO FREE PARKING IS AVAILABLE.**

A separate nomination form must be completed **for each child in your family (Years. 2-6).**

These need to be returned to the classroom teacher by **Friday 14th February 2020 (Week 2).**

Finally, we also ask that if you are able to spend some time on the day, volunteering as a timekeeper, judge or swimming helper that you email Mr Lowe at

matt.lowe@cg.catholic.edu.au and indicate your availability. In order to volunteer on the day, **you will need to hold a valid Working With Vulnerable People (WWVP) Card.** Please provide a copy of your card to our Front Office and let Mr Lowe know in your email if this has already been done. If you are unable to get a WWVP card in time a Statutory Declaration form can be filled out at the front office, this will cover you for the day of the carnival only.

**PLEASE RETURN ALL FORMS BY
Friday 14th FEBRUARY 2020 (WEEK 2)**

Kind regards,

Matthew Lowe

Sports Coordinator

PERMISSION SLIP

SWIMMING CARNIVAL – Friday, 21st February 2020

I give permission for my child _____ in class _____ to travel by bus to and from Phillip Pool on Friday 21st February 2020 and to participate in the Swimming Carnival.

**Please tick one of the following statements:

My child **can** enter and exit the pool, swim 25 metres unaided and tread water for 1 minute.

My child **cannot** enter and exit the pool and cannot swim 25 metres or tread water for 1 minute.

Signed _____ Parent/carer

Date _____

Emergency Contact Name and Number for the day:

Medical information (if applicable):

Parent Helpers:

I _____ am able to assist on the day in the following capacity (please tick to indicate your availability):

Mobile number: _____ WWVP Card No: _____

Time	Setup/packup	Swim testing (am)	Time Keeping	Recording help (P.Pop sticks)	Marshalling
All Day					
½ day Morning					
½ day Afternoon		N/A			
Other					