



GLENHAVEN PUBLIC SCHOOL

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27 January, 2023

2023 ANNUAL SWIMMING CARNIVAL – COMPETITORS ONLY

Our School Annual Swimming Carnival is being held on **Monday 20 February, 2023** at the **Knox Grammar Aquatic Centre**.

Please be advised that participation in the Carnival is **ONLY FOR COMPETITOR SWIMMERS** and competitive races will be based on the registration form completed by parents.

Date: Monday 20 February, 2023
Venue: Knox Grammar Aquatic Centre, 7 Woodville Ave, Wahroonga
Time: 8.45am *bus will depart promptly*
Return: 2.55pm
Cost: \$20.00 per student non-refundable

Please note that students **must be turning 8 years of age or over in 2023 and can confidently swim 50m** to compete in PSSA Swimming Carnivals. Please indicate all races that your child may wish to compete. Heat lists will be posted up for students to check prior to the Carnival. Your child will be required to check their entries are correct (including House, Age, Date of Birth, Spelling, etc) prior to the Carnival as no changes will be made on the day. Children can withdraw from events on the day but can **NOT** be added to events.

EVENT REGISTRATION IS REQUIRED FROM EVERY COMPETITOR

Please complete and sign the digital 'Event Registration' no later than **FRIDAY 10 FEBRUARY, 2023** and note that **payment will be invoiced on the Term 2 Account**.

No child will be able to swim in a race unless the Event Registration Form is signed and returned to the Office on or before the due date.

Late entries will not be accepted. Entries will not be accepted on the day.

Mr David Reid
Coordinator

Kerry Maxwell
Principal

(Please keep this section for your information)

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Please complete and sign the digital event registration or return this section to the **Red Box in the School Administration Office Foyer** no later than **Friday 10 February, 2023**

GLENHAVEN PUBLIC SCHOOL - 2023 ANNUAL SWIMMING CARNIVAL – COMPETITORS ONLY PERMISSION NOTE

I give permission for my child..... of class..... to participate in the **2023 Annual Swimming Carnival**. I understand that the 2023 Annual Swimming Carnival is for competitors only and that my child will be travelling to and from the venue by bus on **Monday 20 February, 2023** to participate in the Carnival and the cost of this is **\$20.00**. I understand that the permission note and event registration is due **no later than Friday 10 February, 2023 and payment will be invoiced on the Term 2 Account**. I also understand that there will **not be a refund if my child is unable** to attend on the day.

I note that there is a risk of contracting Covid at any event. I acknowledge that this event/activity is required to be held in accordance with any current NSW Health COVID-19 Public Health Orders and the NSW Department of Education's policies and procedures. I acknowledge and accept that there is a risk that my child may be exposed to COVID-19 whilst attending and participating at this event. I confirm that my child will not attend if displaying any symptoms of illness, and/or if directed to isolate under public health orders.

Signed: (Parent/Caregiver) Date:

2023 Event Registration Form

Child's Name: Class:

Age turning in 2023: Date of Birth: House:

I give permission for my child: of class:
to compete in the following events nominated.

NOTE: A signature is required underneath **each and every event** that your child wishes to participate in.

FREESTYLE OPEN 100m		OPEN 200m MEDLEY	
Parent / Guardian Signature		Parent / Guardian Signature	

FREESTYLE - 50m (Age Races)		BACKSTROKE - 50m (Jnr/11yrs/Snr)	
Parent / Guardian Signature		Parent / Guardian Signature	

BREASTSTROKE - 50m (Jnr/11yrs/Snr)		BUTTERFLY - 50m (Jnr/11yrs/Snr)	
Parent / Guardian Signature		Parent / Guardian Signature	

If your child has any medical conditions that may have an impact on this excursion, (eg. Asthma, Anaphylaxis) please indicate below:

Medical Conditions:

I acknowledge that my child can confidently swim 50m unaided and that they have permission to compete in the events listed above, that I have signed for and individually authorised.

Parent/Caregiver: Date:

I am able assist as a volunteer timekeeper at the event (Parent/Caregiver)