2019 ARANDA COMPETITIVE SWIMMING CARNIVAL

Signature of Parent: _____

(Year 2, 3, 4, 5 and 6)

8yrs old and above





Aranda Competitive Swimming Carnival

Please note on the following page there is a link to a nomination form where students must nominate the events they would like to compete in. Only students born from 2006 to 2011 will be permitted to nominate as a competitor.

COST \$8.00	Cost cover	rs: Travel	☐ En	try 🗵	Program	\boxtimes	Other		
NOTE: Excursions are an optional enrichment activity and parents are expected to cover the costs incurred. If your child is not able to attend on the day, refunds may not be available for some or all of the costs. DATE Wednesday, 27 February 2019 MEETING TIME 8.45 AM									
EVENT LOCATION	Ca	•	ational Spo		quatic Centre (Bruce.	(CISAC	c) – Corner	of	
MODE OF TRANSPORT		Competitors are to be dropped off by parents at Canberra International Sports & Aquatic Centre (CISAC) Corner of College Street and Eastern Valley Way Bruce at 8:45am where they will be met by the supervising teacher for a 9:00am start. At the completion of the carnival students will be walking back to school with teachers. Students in Years 3-6 and students 8 years old or turning 8 years old in							
PURPOSE	20 ST	19 from Year UDENTS CO	2 to particip MPETING	ate in co N RACE	mpetitive swim S WILL BE AT te events via t	nming r	aces. ONL\ NG THIS		
TEACHER IN CHAR		hn Boland & (
EQUIPMENT NEEDED		Swimming apparel, towel, swimmers, swimming cap, water bottle, sunsmart hat, clothing in house colours, sun cream, clothes to keep warm							
CONTACT NUMBER		tween races, 42 3030	school unifo	rm and s	hoes for retur	ning to	school.		
FORM DUE TO FRONT OFFICE by 3.30pm Wednesday, 20 February 2019. DUE TO OPERATIONAL DEADLINES FOR THE COMPETITIVE SWIMMING CARNIVAL NO RACE ENTRIES WILL BE ACCEPTED AFTER 3:30PM ON Wednesday, 20 February 2019.									
2019 ARANDA	COMPE	TITIVE SW	/IMMING	CARN	IVAL – PE	RMIS	SION NC)TE	
I consent to my child (name) in (class) to attend/not attend (please circle) the Competitive Swimming Carnival at the Canberra International Sports & Aquatic Centre (CISAC).									
I (parent name)	(parent name) have paid the amount of \$8.00 by:								
BANK TRANSFER	CREDI	T CARD (Wes	tpac Quickwel)	CASH		CHEQUE		
Bank Transfer: Aranda Primary School Management Account BSB 032-777 Account 000997 Credit Card: Use PAYMENTS tab on school website home page FEE CODE: APSWIM									
The school has an <i>Excursion Medical Information and Consent Form</i> on file. Please provide details of any current medical requirements and/or other needs of the child relevant to this excursion.									
I have read all the information provided in regards to this excursion and understand its contents:									
Name of Parent: Emergency Contact Number:									

Date: ____/__/

ADDITIONAL INFORMATON

Lunch Students will need a packed recess and lunch plus a water bottle

There will be no canteen facilities available on the day.

Requirements Students will require: swimmers and swimming cap, towel/s, sun-smart hat,

clothing in house colours, water bottle, a jacket or something to keep warm between races, sunscreen, school uniform and appropriate shoes to change into

before returning to school.

Swimming Competency

Competitive swimmers will need to be able to swim a minimum of 50 metres unaided in a recognisable competitive stroke (freestyle, backstroke, breaststroke

or butterfly).

Permission Please complete and return the attached notes to your child's teacher and make

payment by 3:30pm Wednesday, 20 February 2019.

Spectators Parents/Carers are encouraged to attend. However, spectators will be

charged \$2.50 entry to the pool by pool management.

Program Estimated times only:

8:45am Competitors are taken to the pool by parents and met by the

supervising teachers inside the complex at 8:45am and

marked off on a roll.

9:00am-1:30pm Swimming events

(students eat recess and lunch when appropriate)

1:30pm Get changed and pack up

2:00pm Walk back to school with teachers.

Staff accompanying students on excursions will take all reasonable care while the students are in their charge to protect them from injury and to control and supervise their behaviour and activities.

Parents should be aware that staff members are not responsible for injuries or damage to property which may occur on an excursion where, in all circumstances, staff have not been negligent. Parents should warn children of the risk to themselves, to others and to property, of impulsive, wilful or disobedient behaviour.

The school has made every effort to keep costs for this activity at a reasonable level. Financial assistance may be available to assist families who are not able to make the requested contribution. Please contact the Business Manager. If however there is insufficient total funding available to meet the cost of the excursion, regrettably we may not be able to proceed.

The teacher in charge will make arrangements for the welfare of the student (including medical or surgical treatment) in an emergency. The costs associated with any emergency arrangement made by the teacher in charge will be met by the parents/guardians (free ambulance transportation only applies in the ACT).

The student will be under the authority of the school for the duration of the excursion and that the teacher in charge is authorised to return the student to the school at the expense of the parent/guardian if the teacher in charge considers that circumstances warrant such action and after contacting the parent.

IF MEDICAL INFORMATION HAS CHANGED PLEASE PROVIDE AN UPDATED Excursion Medical Information and Consent Form TO THE SCHOOL (available for download from the school website or from the Front Office).

NOMINATION FORM

This year the Aranda Primary Competitive Swimming Carnival will take place on **Wednesday**, **27 February 2019** at **Canberra International Sports & Aquatic Centre (CISAC) Bruce**. Below is a link to a nomination form where students can nominate the events they would like to compete in. In line with School Sport ACT age representative guidelines, **only students born from 2006 to 2011 will be permitted to nominate as a competitor.**

We will be organising the students into heats **before** the carnival date so it is necessary for students to **nominate races no later than 3:30pm Wednesday, 20 February 2019**.

Eligibility for the Belconnen Regional Swimming Carnival

- Schools are able to send a maximum of two swimmers per event who meet qualifying time to the regional carnival
- Students can qualify for a <u>maximum of 7 events</u> at this meet.
- For 8, 9 and 10 year olds, all 50M events apart from the 50M Freestyle, will be a 10 & Under event.
- All 100M and 200M events will be for competitors 10-12yrs.

2019 ARANDA COMPETITIVE SWIMMING CARNIVAL

FORM DUE TO FRONT OFFICE by 3.30pm Wednesday, 20 February 2019. I consent to my child (Name) _______ of (Class) ______ to participate in the following event/s and attend the Aranda Competitive Swimming Carnival on Wednesday, 27 February at CISAC Swimming Centre in Bruce. To nominate for swimming events please complete the Google Form using the following link by 3.30pm on Wednesday, 20 February 2019: https://goo.gl/uVpMEc If you have any issues or questions please contact the front office. I agree that my child is a competent swimmer. SIGNED: ______ (Parent/Carer) EMERGENCY CONTACT: _______ NAME: ______ DATE: _______

2019 ARANDA COMPETIVIVE SWIMMING CARNIVAL – OFFER OF ASSISTANCE

We require at least eight parent/carers to assist with timekeeping. If you are able to help on the day would you please complete this **Offer of Assistance Form**.

Please return this form to the Front Office by 3.30pm Wednesday, 20 February 2019.

I would be willing to assist at the ca	arnival on Wednesday, 27 February 2018.	
NAME:	SIGNATURE:	
PHONE:	CHILD'S NAME AND CLASS:	

Please circle one: I can attend all day I can attend from 8:30am-11am I can attend from 11am-1pm

PERMISSION FOR INVOLVEMENT IN COMPETITIVE SWIMMING EVENTS

FORM DUE TO FRONT OFFICE by 3.30pm Wednesday, 20 February 2019.

Teachers must be informed of the swimming ability of every child where there is water for swimming or aquatic activities.

As a part of this assessment and to help ensure the safety of your child, please provide the following information:

Name of Child	
Child's DOB	
Year / Class	
My child can swim (tick) No Yes	
Distance my child can confidently swim (tick): 10m 25m 50m 100m +	
I agree to my child taking part in competitive swimming events at the Aranda Competitive Swimming on Wednesday, 27 February 2019 at Canberra International Sports & Aquatic Centre (CIS Bruce.	_
Name of Parent/Carer: (please print)	
Signature:	
Date:	