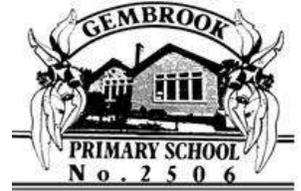


GRADE 3 – 6 SWIMMING CARNIVAL TUESDAY 19th FEBRUARY 2013

February 4th, 2013



Dear Parents,

Gembrook Primary School will be holding our 9th Annual Swimming Carnival at Belgrave Aquatic Centre (cnr Blair & Best Street, Belgrave) on **Tuesday 19th, February**. The cost of participation is **\$14 which includes pool hire, entry and transport**.

We will be leaving school at 9.10am and returning to school by 2pm. Buses are seat belted. Children will need to bring play lunch, lunch, drinks and a towel in a backpack/school bag. Please ensure all belongings are named. A kiosk (snack food) will be open on the day.

Children are required to wear their swimming gear to school **under** their school uniform.

All children must wear a **WIDE BRIMMED HAT** and have **SUNSCREEN** applied before school and have some available to reapply throughout the day. **A rash vest/t-shirt is also required for activities in the pool.**

If you are able to assist at the event your help would be greatly appreciated. Please contact me before the day. Parents/Guardians are welcome to come along and join in on our fun day.

Please return permission slip and payment to school by Friday 8th February.

Tabitha O'Brien
PE Teacher

**PLEASE RETURN THIS portion of the PERMISSION SLIP TO THE CLASSROOM OR OFFICE WITH PAYMENT BY
FRIDAY 8th FEBRUARY 2013**

Grade 3 – 6 Swimming Carnival at Belgrave Aquatic Centre Cost: \$14

I give permission for my child _____ in Grade _____ to participate in the Swimming Carnival at Belgrave Aquatic Centre on Tuesday February 19, 2013.

**I WISH TO PAY THIS EXCURSION FROM THE EMA (Valid applicants only)
(Education Maintenance Allowance)**

I ENCLOSE \$.....Cash Cheque Credit Card



FOR THIS ACTIVITY.

THIS IS A SPORT ACTIVITY NOT COVERED BY THE EXCURSION PRE PAYMENT.

I authorize the teacher in charge of the excursion/tour/activity to consent where it is impracticable to communicate with me, to my child receiving such medical or surgical treatment as may be deemed necessary. I further agree that in the event of any expenditure necessarily and properly incurred by the school to preserve the health, safety or well-being of my child, I will reimburse the school to the full extent of such expenditure.

PARENT'S NAME

PARENT'S SIGNATUREDATE

PLEASE DEBIT MY CREDIT CARD FOR THE 2013 Swimming Carnival. \$14

MASTERCARD BANKCARD VISA **AMOUNT: \$**

(Please note: American Express & Diners Club not accepted)

CARD NUMBER: Expiry

Date: _____ / _____

		/ /
CARD HOLDER'S NAME (Please Print)	CARD HOLDER'S SIGNATURE	DATE