

# LEURA PUBLIC SCHOOL

**Cnr Mount Hay Rd and Willow Park Ave** 

Leura, 2780

ph : 4784 1251 fax : 4784 3156 email : leura-p.school@det.nsw.edu.au

respect

responsibility

resilience

Wednesday 22<sup>nd</sup> November 2023

## LEURA PUBLIC SCHOOL 2024 SWIMMING CARNIVAL Wednesday 7<sup>th</sup> February 2024 (Term 1, Week 2)

Note: Payments can be made online, as well as by cash or cheque For payments online enter: Payment Description: 2024 Swimming Carnival Payment Amount: \$16.00 (full payment) <u>OR</u> \$11.00 (with a pool pass/fitness passport) Payment Due: Wednesday 6<sup>th</sup> December 2023 Please note: LATE PAYMENTS MAY NOT BE ACCEPTED

Dear Parents/Carers,

This note is to provide you with information regarding the **2024 Leura Public School Swimming Carnival**, details of which are outlined below. <u>Please keep this page as it contains important</u> <u>information</u>.

Date:	Wednesday 7 <sup>th</sup> February 2024 (Term 1, Week 2)		
Educational rationale:	The annual swimming carnival will be held on <b>Wednesday 7<sup>th</sup></b> <b>February 2024</b> at Lawson Aquatic Centre commencing at 9:45am and finishing at 2:30pm.		
Excursion to:	Lawson Swim Centre, St Bernards Dr, Lawson, NSW 27783 Ph: 02 4759 1458		
Classes attending:	<ul> <li>Students from Years 3 to 6 are expected to attend and will be able to compete in the various age races and style events. However, if your child is a non-swimmer or cannot swim 50m without stopping or touching the floor of the pool, they will not be eligible to enter swimming events.</li> <li>Year 2 students who turn 8 years old in 2024 and are able to swim 50m without stopping or touching the floor of the pool are invited to attend the carnival and enter events. All other Year 2 students will remain at school.</li> <li>On arrival, students will be seated in their house groups.</li> </ul>		
Departure Time:	Students need to <b>arrive at Leura Public School by 8:45am</b> to have the roll marked. <b>The bus leaves at 9:00am sharp</b> for Lawson Swim Centre.		
Return Time:	3:00pm Students will return to Leura Public School for home time as per normal arrangements		
Transport:	All students must be transported to and from the pool by bus.		
Organising teachers:	Mrs Ptolemy, Mr Atkinson, Ms Farrell and teaching staff.		
Staff in attendance:	All 3-6 teaching staff		



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Dress:	Sports house colours and a hat		
Cost per student:	\$16.00 (full payment) or \$11.00 (with a pool pass/fitness passport). All students are expected to catch the bus to and from the carnival as there will be some morning organisation prior to attending the carnival.		
Specific Requirements:	<ul> <li>On the day of the carnival students should come to school with the following items: <ul> <li>Swimming gear and towel</li> <li>Wide brim hat</li> <li>Suitable clothing (no singlet tops) in Sports House colours</li> <li>Recess, lunch and a drink</li> <li>Extra water if desired</li> <li>Sunscreen</li> <li>Spending money for the canteen (optional).</li> </ul> </li> <li>*Should the weather be inclement on the day, competitors only will go to the pool. Parent helpers will still be needed.</li> </ul>		
Volunteers:	Volunteer helpers are essential to making this event happen and are most welcome. Please complete the note on the attached form and return to the school office. All volunteers must have participated in a Volunteer Induction with the Principal and complete the DoE (Department of Education) WWCC (Working with Children Check) Declaration for Volunteers and provide photo identification to the school office.		
Due date for payment & permission note:	PLEASE COMPLETE ALL SECTIONS OF THE PERMISSION NOTE. Payment due and permission note must be returned to Leura Public School office by Wednesday 6 <sup>th</sup> December 2023. Please note late payments may not be accepted.		

Kind regards,

Mr Atkinson and Ms Farrell Swim Carnival Organisers Mrs Ptolemy Principal



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Return permission note to Leura Public School office by Wednesday 6<sup>th</sup> December 2023 Please note: LATE PAYMENTS MAY NOT BE ACCEPTED

PLEASE COMPLETE ALL SECTIONS OF THE PERMISSION NOTE

## LEURA PUBLIC SCHOOL 2024 SWIMMING CARNIVAL Wednesday 7<sup>th</sup> February 2024 (Term 1, Week 2)

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Payment Due: Wednesday 6<sup>th</sup> December 2023 Please note: LATE PAYMENTS MAY NOT BE ACCEPTED

Student Name:

\_ Class: \_

□ I give permission for my child to participate in Leura Public School 2024 Swimming Carnival to be held at Lawson Swim Centre on Wednesday 7<sup>th</sup> February 2024.

□ I understand the cost for this event is \$16.00 (full payment) OR \$11.00 with pool pass/fitness passport and payment is required by Wednesday 6<sup>th</sup> December 2023.

I understand late payments **may** not be accepted and I will contact the school if there are difficulties in meeting this deadline.

## Payment (please tick where appropriate)

- □ I have enclosed cash or cheque payment of \$16.00 (full payment)
- □ I have enclosed cash or cheque payment of \$11.00 (with a pool pass/fitness passport) OR

□ I have paid \$16.00 (full payment) online. Receipt no. \_

□ I have paid **\$11.00 (pool pass/fitness passport)** online. Receipt no.

## **Swimming Ability**

My child is a proficient swimmer over 50m and may enter events commensurate with their ability OR

My child is a low ability or non-swimmer and does not have permission to enter events

## Sunscreen permission

I give permission for my child to use sunscreen supplied by Leura Public School

#### PLEASE COMPLETE <u>ALL</u> SECTIONS OF THE PERMISSION NOTE Continued next page

TRUTH INDIVIDUE COUTO		Cnr Mount Hay Leu ph : 4784 1251	JBLIC SCHOOL Rd and Willow Park Ave ura, 2780 fax : 4784 3156 school@det.nsw.edu.au
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Return p	Please not	te: LATE PAYMENTS MAY NOT	
	PLEASE COM	PLETE <u>ALL</u> SECTIONS OF THE P	ERMISSION NOTE
Student Name:			Class:
OR		current for my child	
L I have listed my child on the	-	medical information and any a	allergies or conditions that may affect
			Date:
		on the day:	
<i>χ</i>		C SCHOOL 2024 SWIMI VOLUNTEER	
•		ol 2024 Swimming Carnival on I 2:00pm. (approx.)	Wednesday 7 <sup>th</sup> February 2024
Student Name:	·		Class:
Volunteer Nam	ne:		Date:
Relationship to	student:		
Volunteer Sign	ature:		
Volunteer Cont	tact Phone no:		