ANNUAL SWIMMING CARNIVAL – Wednesday 25th February 2015

Parents are invited to attend our annual school swimming carnival, as either spectators or helpers, to support and encourage the children.

WHERE: Hornsby Aquatic and Leisure Centre, Pacific Highway, Hornsby NSW 2077
WHEN: Wednesday 25th February 2015.
TRAVEL: By bus. (Children may leave after carnival with parents, after signing out.)
COST: $9.50 per child. Do not send money. This cost is included in your Term 1 invoice. ($3.00 entry for parents/spectators)
WHAT TO BRING: Recess and lunch (no glass bottles) Limited pool canteen facilities will be available
Swimming costume to be worn under sports uniform
Towel & Sunscreen
Swimming cap (all swimmers are expected to wear caps)
Goggles, if desired
Please NO crepe paper decorations or coloured face paint/zinc

The children may compete in only one of the groups: either GROUP A or GROUP B.

GROUP A
Competitive events – for children with special interest and ability in swimming. The Zone swimming team will be selected from this category. Races will be at least 50 metres. Races will commence after 9:00am.

GROUP B – Time Permitting
25 metre events in the shallow half of the pool - for those who wish to compete in a freestyle race but not confident in swimming 50 metres. Entry points contribute to the overall point score.

The focus of the carnival is selection for the Zone Team but participation is also encouraged. We are always very limited with time. However, we will make every effort to accommodate those students wishing to participate in the 25m races.

The permission note for your child to attend the swimming carnival is set out on the following page. Please complete this section and return it to school by Wednesday 11th February 2015. If you expressly wish your child not to enter the water, sign the attached exclusory statement.

Anaphylactic Students
Whilst Normanhurst West is not a nut free school, please be aware that several students have a severe allergy to nuts and nut based products which will trigger an Anaphylactic Shock. So as to minimise the risk of accidental exposure, we are seeking your cooperation in not sending any nuts or nut based product with your child for morning tea or lunch e.g. peanut butter sandwiches, packets of nuts, snack packs with dried fruit, nuts, Nutella etc. If your child has peanut butter for breakfast could you please make sure that they have brushed their teeth thoroughly and washed their hands. This will also help to minimise the risk of accidental exposure. We thank you for your cooperation.

It is important to note, that any parents who is interested in remaining at the pool after the carnival with their child will need to leave the pool with the school but may re-enter after, as a paying member of the public.

Request for parent helpers as timekeepers on the day
Parents are invited to volunteer their time in assisting us with timekeeping and judging during the carnival. If you feel you would be able to assist please complete the form on the back of this note to the office.

Parking
There are 111 parking spots available below the Hornsby Aquatic and Leisure Centre. The first 3 hours is free, the cost then becomes $5 per hour in hourly increments.

This activity has the approval of the Principal.

Mrs R. Barrett & Mr D. Vaughan Mr G. McLaren
Swimming Coordinators Principal
Return by Wednesday 11th February 2015 – to school office
PARENT HELPER NOTE, NWPS SWIMMING CARNIVAL, 2015.

I am able to assist with the timekeeping of events at the NWPS Swimming Carnival to be held at Hornsby Aquatic & Leisure Centre on Wednesday 25th February, 2015.

Signed: __________________________ Parent's Name ______________________________________
          (Parent/Guardian)

Child: ___________________________ Class: _______

Child: ___________________________ Class: _______
Please return this entry form as well as the blue Consent Form to the class teacher by Wednesday 11th February 2015 at the latest.

Normanhurst West Public School
2015 SWIMMING CARNIVAL ENTRY

* Please complete a separate form for each child.

Name: 

Class: ___________ Boy / Girl (Please circle one)

Year of Birth: ___________ HOUSE: ___________

All competitors entering these events MUST be able to confidently swim the specified distances.

Please tick the events you wish to enter and return the completed form to school as soon as possible. Please keep a note of the events entered for your own reference.

Please note: a child can only compete in Group A OR Group B, NOT BOTH.

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<thead>
<tr>
<th>EVENT</th>
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<tbody>
<tr>
<td>GROUP A</td>
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<tr>
<td>Junior 4x50m medley</td>
<td>____</td>
<td>Junior 50 m breaststroke</td>
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</tr>
<tr>
<td>Senior 4x50m medley</td>
<td>____</td>
<td>11 yrs 50 m breaststroke</td>
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<td>All age 100 m freestyle</td>
<td>____</td>
<td>12-13 yrs 50 m breaststroke</td>
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<tr>
<td>8 yrs (2007) 50 m freestyle</td>
<td>____</td>
<td>Junior 50m backstroke</td>
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<td>9 yrs (2008) 50 m freestyle</td>
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<td>11 yrs 50 m backstroke</td>
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<tr>
<td>10 yrs (2005) 50m freestyle</td>
<td>____</td>
<td>12-13 yrs 50 m backstroke</td>
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<tr>
<td>11 yrs (2004) 50m freestyle</td>
<td>____</td>
<td>Junior 50m butterfly</td>
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<tr>
<td>12-13 yrs (2003/2) 50m freestyle</td>
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<td>11 yrs 50m butterfly</td>
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<td>____</td>
<td>12-13 yrs 50m butterfly</td>
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NB. Age in 2015

Junior = 8/9/10 year old
(Born 2007, 2006, 2005)

GROUP B – Time Permitting

25m freestyle

I am aware and happy that my child has entered the above events.

Signed: ___________________________ Date: ___________

(Parent/Guardian)

Swimming entry
SWIMMING CARNIVAL CONSENT FORM

I hereby give consent for my child ___________________________
of class __________ to participate in an excursion to Hornsby Aquatic and
Leisure Centre for the NWPS Swimming Carnival on 25th February 2015.

Travel will be by bus.

- In relation to the proposed water or swimming activities, I advise that my child is
  a strong / average / poor / non-swimmer. (Delete words not applicable.)

- In the event of injury or illness, I also authorise (on my behalf) the seeking of
  such medical assistance that my child may require.

- Special needs, for my child, of which you should be aware (e.g. allergies,
  medication, etc.) are:

  _______________________________________________________________

  _______________________________________________________________

  _______________________________________________________________

  Cost: $9.50. This cost is included in your Term 1 invoice.

  By signing this form you consent to pay the cost of this excursion.

☐ I do not wish my child to enter the water at the swimming carnival.

Signed: ___________________________  Date: ________________
(Parent/Guardian)

Please return this form to class teacher by Wednesday, 11th February, 2015