



Jasper Road Public School

Jasper Road, Baulkham Hills. NSW 2153
Telephone: 9639 6801 9639 6688 Fax: 9639 4487
Email: jasperroad-p.school@det.nsw.edu.au
Web: <https://jasperroad-p.schools.nsw.gov.au>

30 January 2019

2019 Swimming Carnival

Dear Parents/Carers,

Our 2019 School Swimming Carnival is being held on **Friday, 22 February 2019** at **Waves Fitness and Aquatic Centre, Baulkham Hills.**

Students will be travelling by bus, departing from school at **9:00am**, returning approximately **2:45pm** and will be supervised by classroom teachers. Students should wear their sports uniforms but may bring accessories in their sports house colours. No coloured zinc or face paint is permitted. Students should bring all food and drinks required as canteen/vending machines will not be available. No glass bottles or glass containers are permitted in the venue.

Please note that this year's carnival will be **COMPETITORS ONLY** and only students that are entering races will be attending.

The cost per student is \$12.00 which includes pool entry and travel to and from the carnival by bus. If your child is absent from school on the day, the cost still applies and no refunds will be permitted. Please note that the preferred method of payment is Parent Online Payment.

Parents are invited to come and support their child on the day. We would also appreciate the assistance of at least 35 parents to be officials at the Swimming Carnival. Cost for parents/spectators is \$2.00 (*payable at the pool*).

Yours faithfully

Mr Craig Warner
Principal

Mr Tom Gosper
Swimming Carnival Coordinator

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Jasper Road Public School - 2019 Annual Swimming Carnival (Parent Online Payment is the school's preferred method of payment)

I have made an online payment on / / . My receipt number is: _____

Child's Name : _____ Class : _____

I have made a cash payment of \$12.00.

NB: If payment has been made in cash please place payment in an envelope clearly marked with your child's name, class and the amount enclosed.

Please staple the permission note to the payment envelope.



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Jasper Road Public School - 2019 Annual Swimming Carnival Parent Volunteers

I am **ABLE** to assist as an official at JRPS Swimming carnival on **22 February 2019** at **Waves Aquatic Centre**.

Parent Name: _____ Mobile Phone Contact No: _____

Child's name _____

Signed: _____ / _____ / _____ Date

Jasper Road Public School – 2019 Annual Swimming Carnival Student Details - (One form to be completed for each child)

Child's name: _____ Current Class: _____ M/F: _____

Date of Birth: ____ / ____ / _____ Age in 2019: _____ Sport House: _____
(Age in 2019: Born 2011 - 8yrs, 2010 - 9 years, 2009 - 10 years, 2008 - 11 years, 2007 - 12 years, 2006 - 13 years)

(PLEASE TICK THE APPROPRIATE CIRCLES BELOW)

EVENTS:

(Please tick all applicable events and include their age category):

50m Freestyle (there are heats for each age group)

50m Backstroke **50m Breast stroke** **50m Butterfly**

PLEASE INDICATE THE CORRECT AGE CATEGORY FOR THE EVENTS BELOW

<input type="checkbox"/> Junior (8/9/10 Years)	<input type="checkbox"/> Junior (8/9/10 Years)	<input type="checkbox"/> Junior (8/9/10 Years)
<input type="checkbox"/> 11 Years	<input type="checkbox"/> 11 Years	<input type="checkbox"/> 11 Years
<input type="checkbox"/> Senior (12/13 Years)	<input type="checkbox"/> Senior (12/13 Years)	<input type="checkbox"/> Senior (12/13 Years)

100m Freestyle – Open (all age race 8-13 years) **200m medley – Open** (all age race 8-13 years)

TO BE COMPLETED FOR ALL STUDENTS ATTENDING THE CARNIVAL:

By signing this form I give my permission for my child to participate in the JRPS Swimming Carnival on Friday 22 February, 2019 at Waves Aquatic Centre, Baulkham Hills. To the best of my knowledge, my child has no medical condition, physical disability or injury which puts them at risk whilst participating in the Carnival.

SPECIAL NEEDS OF THE CHILD OF WHICH THE SCHOOL NEEDS TO BE AWARE
(e.g. allergies, medication – please provide full details)

Name and Signature of Parent/Carer

Date