Dear Parents,

This year our annual school Swimming Carnival will be held on **Wednesday 15th February 2012** at Ripples Swimming and Leisure Centre commencing at 5.00pm. All students turning 8 years or older are invited to attend, as this carnival enables our students to compete for qualification at the Penrith District Swimming Carnival.

The cost of the carnival is $5.00 per competitor and $3.00 for each spectator, which is to be **paid upon entry to Ripples**. Students and spectators are asked to enter the premises through the side gate (south of the main entrance), where Ripples staff will collect entry payment. Due to Departmental guidelines and the availability of supervision, no other person is permitted to swim in the pool during the carnival.

Parents are expected to accompany their children to the pool and stay for the duration of the carnival. Competitors will be asked to sit in the marshalling area so they are supervised and ready for their event/s. Parents are able to take their child home as soon as they have finished all their events. Please sign your child out (at the Recorders table) before you leave.

The pool canteen will be open if you wish to purchase food, however we do suggest that competitors do not eat between events. Competitors should ensure that they wear their swimmers to the pool. With them they should bring:
- A towel, goggles (if required), sunscreen, hat, suitable shoes
- As this carnival is designed to set qualifying times for our District Swimming Carnival, students will **not** be permitted to use any floatation devices or equipment.

To comply with Departmental procedures, students will be required to watch a short presentation on Safe Diving Practises. This will be shown at school and we will also use this time to discuss safety information in and around the pool. Please be aware that all accompanying staff members have emergency care and CPR training.

In order for the carnival to run smoothly, for each competitor we require a complete nomination form, permission note and medical information form returned to **Mrs Fox** by **Wednesday 8th February 2012**.

**Mrs Fox**
Sports Coordinator

**Ms Petrocco**
Principal
KINGSWOOD PUBLIC SCHOOL
2012
Annual Swimming Carnival

EVENT NOMINATION FORM

Child’s Name: ____________________________ Class: ________
Please tick the appropriate sex, age group and selected events for your child. Children must compete in the age group they are turning THIS year.

Age Groups for 2012 Swimming Carnival
These are the ages that your child has already turned or will turn in 2012:

| Born: | 2004 8 years Junior | 2001 11 years |
|       | 2003 9 years Junior | 2000 12 years Senior |
|       | 2002 10 years Junior |

<table>
<thead>
<tr>
<th>Sex</th>
<th>Boy</th>
<th>Girl</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>8 years</td>
<td>9 years</td>
</tr>
<tr>
<td></td>
<td>Junior</td>
<td>Junior</td>
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</tbody>
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<table>
<thead>
<tr>
<th>Events</th>
<th>50 m Freestyle (raced in age groups)</th>
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<tbody>
<tr>
<td></td>
<td>50 m Backstroke (Junior, 11yrs, Senior)</td>
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<tr>
<td></td>
<td>50 m Breaststroke (Junior, 11yrs, Senior)</td>
</tr>
<tr>
<td></td>
<td>50 m Butterfly (Junior, 11yrs, Senior)</td>
</tr>
<tr>
<td></td>
<td>Open 100m Freestyle (all ages)</td>
</tr>
<tr>
<td></td>
<td>Open 200 m Individual Medley (all ages)</td>
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</tbody>
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Please return the event nomination form, permission note AND medical form to Mrs Fox by Wednesday 8th February 2012.
I give permission for my child: ________________________________ of class: ________
to enter the nominated events as indicated on Wednesday 15th February 2012. I am
aware that I am responsible for my child’s transport to and from Ripples. I understand
that the cost of entry is $5.00 for competitors and $3.00 for spectators, payable at the
pool.

This activity has the approval of the Principal.

Signed Parent / Caregiver: ________________________________ Date: ____________

Please sign appropriate line.

My child can swim 100m unaided ________________________________

OR

My child can swim 50m unaided ________________________________

If your child cannot swim 50m unaided they will be unable to participate in the carnival

I give/do not give permission for my child to receive any First Aid Treatment if required,
by qualified staff members of Kingswood Public School and/or Ripples Leisure Centre.
Please list any current, relevant medical conditions

____________________________________________________________

____________________________________________________________

Signed Parent / Caregiver: ________________________________ Date: ____________