Dear Parents,

On **Monday 18 November 2013**, Grade 3 – 6 students will be involved in the House Swimming Carnival at Bialik College, Hawthorn East.

All children are expected to be involved and attend school even if unable to swim. Based on the results of the children in Grades 3 – 5 our swim team for next year will be selected. If you are aware that your child will be unable to participate in the District Championships next year due to your child not being at the school please indicate on the form below.

All students will be leaving school at 9am and will be back after lunchtime (approximately 2.30pm).

Children need to have:
- appropriate shoes, shorts, t-shirt, bathers, swimming cap and goggles
- drink bottle/s
- a big breakfast before school
- any medication/s (e.g. puffer)
- a healthy snack and lunch in a lunchbox with minimal rubbish

**Children are encouraged to wear their HOUSE team colours. NO face paint or dyed hair please!**

The cost of the House Swimming Carnival is $14 per student, which will be deducted from the excursion levy.

As with all school events, we need parental help. Scorekeepers, place judges and parents to accompany classes on the buses are some of the jobs needed. Your assistance is vital for the event to run. Please remember that all helpers need to have a current Working with Children Check.

Please return the permission form by **Wednesday 13 November**.

Regards,

Natasha Williams

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**2013 HOUSE SWIMMING CARNIVAL**

I consent to my child, ____________________________ Grade ______ travelling by bus and participating in the House Swimming Carnival at Bialik College, Hawthorn East. I authorise the teacher in charge of the excursion to consent, where it is impracticable to communicate with me, to the child receiving such medical or surgical treatment as may be deemed necessary.

Payment for the excursion will be made as indicated below:
- I have previously paid the excursion levy [ ] OR
- I have enclosed $14.00 to cover excursion [ ]

Parent’s Name: __________________________________________

Parent’s Signature: ____________________________ Date: __________

Emergency contact numbers ________________________________ ; ________________________________

I, ____________________________ can help out on the day.

Working With Children Check Number: ______________

I can help with (please circle one or more): Record keeping Marshalling Judging Travelling on the bus

**To assist with 2014 planning:**
- [ ] My child will not be at Glen Iris Primary in Term 1, 2014 and will therefore not be able to be selected as part of the Glen Iris Swim Team.