

# ST THOMAS MORE'S PRIMARY SCHOOL

24 White Cres, Campbell, ACT 2612 | PO Box 36  
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*Centred in faith and learning | Inspiring minds | Nurturing hearts*

## St Thomas More's Athletics Carnival

Dear Parents,

Our Athletics Carnival will be held on **Wednesday 28 June 2017**. This year our carnival will be held at Merici College.

<b>DESTINATION</b>	Merici College Wise St, Braddon
<b>PURPOSE OF EXCURSION</b>	Athletics Carnival
<b>DATE</b>	Wednesday 28 June 2017
<b>TIME</b>	9:15 am depart St Thomas More's, 1:15 pm depart Merici College ( <b>K-2 students will depart at 12:30 pm</b> ).
<b>TRANSPORT</b>	Bus
<b>WHAT TO WEAR</b>	Sports Uniform (You may wear a shirt of your house colour)
<b>WHAT TO BRING</b>	Water bottle, sunscreen, recess and lunch (a sausage sizzle lunch will be provided), jumper and hat
<b>YEAR LEVELS INVOLVED</b>	K - 6
<b>PARENT HELP REQUIRED</b>	<b><u>We need volunteers to help with all aspects of the carnival</u></b>

To ensure the smooth running of the day we require the help of parents to assist with:  
- recording and judging of track events.

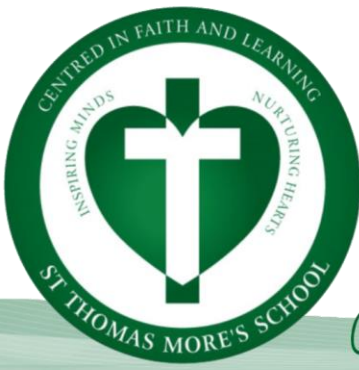
All children are expected to participate in their age races. If you do not want your child to participate, a note excusing them from this type of physical activity is required. The normal medical arrangements will occur during the carnival and children who are asthmatic will need to bring their medication with them on the day.

We appreciate and value your assistance and we hope you will be able to help again this year. Parents are more than welcome to come and cheer on their children. Please indicate on the form attached if you are able to assist on the day and return by **Friday 16 June**. If you have a preference or skill in any area, please let us know.

*Kind regards,*

**Dayne Spencer & Jessica Pearson**  
**Carnival Coordinators**





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## ST THOMAS MORE'S ATHLETICS CARNIVAL

I give permission for my child \_\_\_\_\_ to travel to **Merici College, Braddon by bus on Wednesday 28 June 2017** and agree to delegate my authority to the staff and instructors involved. Such teachers and instructors may take appropriate disciplinary action in accord with school policy to ensure the safety, well-being and successful conduct of the students as a group or individually, in the above mentioned activities.

I also authorise the teachers and instructors to obtain necessary medical assistance should an accident occur and agree to pay all medical expenses incurred on behalf of the above student.

I submit the following medical information about the above student and include details of limitations which he /she has for the activity concerned.

I further authorise qualified practitioners to administer an anaesthetic if such an eventuality arises.

If your child has any medical condition the staff and instructors need to know please give details.

\_\_\_\_\_

I have read the information regarding this excursion and understand what it contains.

**Signature of Parent / Guardian:** \_\_\_\_\_

**Emergency Contact Number:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Dietary Requirements for Sausage Sizzle Y/N** \_\_\_\_\_

I am able to assist with the Athletics Carnival on **Wednesday 28 June 2017**

I would like to help with

- |                                      |   |
|--------------------------------------|---|
| <input type="checkbox"/> Don't mind  | <input type="checkbox"/> 5, 6 & 7yrs activities |
| <input type="checkbox"/> Place Judge | <input type="checkbox"/> Recording              |

My WWVP card number is: \_\_\_\_\_. If you do not have a WWVP card, you can sign a form on the day.

