

22 June 2009

Dear Parents,

As you are aware, the Years 4 to 11 Athletics Carnival is to be held **Tuesday the 14th July** at the Sunshine Coast University Track (Sippy Downs). We enjoyed a successful day at this facility last year and have opted to use this track for its ample space for spectators and quality athletic facilities.

Students will board the bus **no later than 8:15am** for the trip to the Athletic Track. It is important that all students are here for this departure time as we have a tight schedule to fit in all the planned track and field events on the day. Students will return to school after presentations are made **between 3:00pm and 3:30pm** at the latest. Parents are allowed to take their child/children home after the presentations upon confirming with their Form Teacher.

Students will need to bring:

- Water Bottles
- Sunscreen
- Sports cap / hat a must!
- Food for morning tea and lunch

Students may come to School in their House T-Shirts, sports shorts/skirts and correct sports shoes. On the day students are allowed to **wear navy bike pants** for track and field events. Spiked athletic shoes are allowed for the 100m and 200m events only, however waffle athletic shoes are allowed in all other events. Students will not be required to change into their Formal Uniform at the completion of the day.

Of course, with any Carnival the assistance of parents at the Carnival would be greatly appreciated. I am in particular need of parents to help out with the timekeeping and recording for the track events. Please complete the tear-off slip below and return to your class teacher as soon as you can if you are willing to help out at the carnival.

Please also return the attached permission and medical forms and return to the classroom teacher by **Wednesday 17th June**.

Kind regards

Kieran Villis

Physical Education Co-ordinator

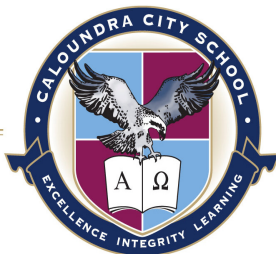
I _____ am willing to help out at the Athletics Carnival on **Tuesday 14th July** at the Sunshine Coast Athletics Track.

Time keeping am / pm

Recording am / pm

BBQ

Contact Phone number : _____



CALOUNDRA CITY SCHOOL CONSENT FORM

Student's Name		Class:	Year 4-11
Activity:	Year 4 – 11 Athletics Carnival 14 th July 2009	Venue:	University of The Sunshine Coast

Please return the consent form to: Classroom Teacher by **Wednesday 17th June 2009**

The Principal
Caloundra City School;
Pelican Waters. 4551

I, _____ being the parent/guardian of the abovementioned student:

1. consent to his/her participation the abovementioned activity under the care and supervision of members of the school staff and other persons authorized by the school.
2. acknowledge that while the school's policy is one of relaxed control, the rules of the school, with which we are familiar, apply at all times, and that any breach of those rules by our son/daughter, or lack of cooperation with supervisors or fellow students on the part of our son/daughter, may result in his/her early return from the activity at our expense. I further understand that he/she is expected to adhere strictly to all details of the planned programme and to the established mode of dress for the occasion.
3. authorize supervisors to act on our behalf, and in particular, where they consider necessary, to seek medical or other treatment for our child, which may include the administration of anaesthetics and/or blood transfusions and in respect of the cost of such treatment shall be liable.

IN CONSIDERATION of the foregoing and of the school allowing our son/daughter to participate in the activity referred to above:

We hereby agree to indemnify and keep the school indemnified in respect of any costs or expenses incurred by the school in connection with:

- the early return of our child from the activity for disciplinary reasons.
- medical treatment afforded to our child taking part in the activity.

Should there be any claims, demands or proceedings arising from our child's participation in the activity we agree to indemnify the school for:

- all excess payments on school insurance policies covering the claim
- all sums beyond the limit of insurance coverage held by the school and applying to the claim.

Signed: _____
Parent/Guardian

Date: _____