WARRAGAMBA PUBLIC SCHOOL

Civic Centre
2-4 Fourth Street
(PO Box 19)
Warragamba 2752

Phone: 02 4774 1205
Fax: 02 4774 2475
Email: warragamba-p.school@det.nsw.edu.au

Nathan Smith
Rel Principal

2nd February, 2015

WARRAGAMBA SWIMMING CARNIVAL

The Year 3-6 SWIMMING CARNIVAL will be held on Friday 13th February, beginning at 9:00am and finishing at approximately 2:30pm.

Please sign the permission note below and return it to the class teacher to allow your child to participate in these activities. Please indicate if your child is a non-swimmer or swimmer and if they can proficiently swim 25m.

Children are to arrive at school by 8:55am. They will be escorted to the pool. Students will need to bring their swimming costumes, towel, sunscreen, hat and dry clothes to change into. All students must wear their house colours (sports uniform).

The cost of the entry is $2-80 or by Season Pass.

The canteen at the pool will be open however we encourage recess and lunch to be provided, along with plenty of drinks. Children will return to school in time to be dismissed at 3:00pm.

Please note that hot food purchased elsewhere is not permitted.

Parents and friends are welcome to attend. Helpers will be needed with timekeeping and judging, so if you can volunteer, your time would be greatly appreciated. Any further enquiries please see Mrs Barlow in 5/6B.

Please remind children they are to bring their towel, sunscreen, hat, swimmers and pool entry $2-80 or season pass

Regards,
Mrs Barlow and Mrs Merrick
Swimming Carnival Coordinators

SWIMMING CARNIVAL – 2015

- MONEY IS TO BE PAID ON THE DAY AT THE POOL
- PERMISSION NOTES TO CLASS TEACHER – THANK YOU

I give permission for ______________________ of class ____________ to participate in the Swimming Carnival on Friday 13th February.

My child is a NON-SWIMMER or SWIMMER / My child is PROFICIENT or NON-PROFICIENT

Please circle

I am willing to cover the cost for my child to attend ($2-80) OR Season Pass No: ________

STUDENTS ARE TO PAY ENTRY TO POOL ON CARNIVAL DAY.

Signed: ____________________________ Date: ____________

Parent/Guardian