



5th June 2017

School Athletics Carnival 2017

Dear Parents,

Our Athletics Carnival will be held on Thursday 22nd June 2017.

The carnival will be run on a tabloid format. Students in Year 2, (**who turn 8 this year**) and all students from Year 3 - Year 6 will be placed in age groups (**age they turn in 2017**) and participating in track and field events with optional novelty activities. Students in Kindergarten, Year 1 and Year 2 (who are 7 this year) will be in mixed colour house groups, participating in a novelty races and activities.

Date: Thursday, 22nd June 2017

Venue: The Hills Centenary Park, Kellyville. Cnr Commercial and Withers Road, Kellyville

Transport: Buses will leave school at 8.45am. We will return for normal school departure.

What to bring and wear:

- Students may wear a shirt in their House colour with school sports pants and school hat, otherwise full school uniform. One point will be allocated to those supporting their House.
- Bike pants (skins) in school colours may be worn.
- Ample healthy food and drink as there is no canteen.
- School hat and sunscreen as there is limited shade.

800m Race

Students in Stage 2, Stage 3 and Year 2 (who are 8 years old) that would like to compete in the 800m (twice around the full race track), must arrive at the **venue** at 8.45am. This race will be the first race of the day (commencing before the buses from school arrive, so own transport to the park is needed).

Permission note attached

All permission slips are to be returned to class teachers by Wednesday 14th June.

Parents are advised that the school athletics carnival is a compulsory part of the school's curriculum. Your child's attendance at school on the carnival day is expected. It is a legal requirement that as the Athletics Carnival is an event occurring on a regular school day, any child not attending will be marked as absent on the class roll and will therefore require a written note of explanation from a parent.

Parent help

Parental help is essential in making this day a success. If you are able to assist, please indicate on the return slip.

If you have any further enquiries please contact the school office.

Yours sincerely,

Miss Lauren Wheeler
Sports Co-ordinator

Mrs Lesley Studans
Principal

St Joseph's Whole-School Athletics Carnival 2017

*Please return this page to your child's classroom teacher
by Wednesday, 14th June.*

1. Permission to participate in the St Joseph's Athletics Carnival 2017

I give permission for my child _____ of class _____ to participate at the St Joseph's Athletics Carnival, on Thursday 22nd June at The Hills Centenary Park, Kellyville.

My child is _____ years old (turning in 2017)

2. Age group my child will participate in on the day. (Age they turn in 2017)

infants novelty activities (ages 7 and below)

8 Years 9 Years 10 Years 11 Years 12 Years

3. Please complete if your child will compete in the optional 800m event (8 years and above only)

Yes, my child will compete in the 800m

Yes, I am aware that I need to drive my child and be at the venue at 8.45am

4. Permission regarding travel arrangements (Please tick appropriate options. Please ensure these details are accurate for the purpose of booking buses.)

My child will travel:

by parent to and from The Hills Centenary Park, Kellyville.

by another parent to and from The Hills Centenary Park, Kellyville.

I give permission for my child to travel with _____

by parent to The Hills Centenary Park and returning to school by bus.

by bus to and from The Hills Centenary Park, Kellyville.

by bus to The Hills Centenary Park, Kellyville and home with parent.

by bus to The Hills Centenary Park, Kellyville and home with another parent.

I give permission for my child to go home with _____

6. Parent Help

Yes, I am able to assist at the Athletics Carnival and I have completed the Child Protection Course in 2016 or 2017. Please indicate/number in order preferred job for the carnival, however, please understand that this may not be allocated to you.

Time Keeping

Set up (be at the venue by 8am)

Long Jump

Novelty/tabloid activities (primary options)

Shot Put

Infants' tabloid activities

Parents/guardian's name _____

Contact number: _____

signature _____

Date: _____

Other emergency contact; Name _____ contact number: _____