



## **Dear Parents and Carers**

The following details relate to an educational excursion to Big Splash, Jamison which will be the venue for this year's school swimming carnival. Students are not required at school before hand and are to make their own way to the pool where they will undergo a swimming proficiency test on arrival prior to roll call being taken. Students are required to bring their permission note and entry cost on the day to enter the pool.

The teachers in charge of this event will be Renee Kirkpatrick & Brenton Mikk

## **IMPORTANT INFORMATION:**

**Event:** Canberra High School Swimming Carnival

Venue: Big Splash, Jamison

Date: 09/02/2018

Time: 8:00- 2:40

Transport: Own way to and from the venue

Cost: \$14 to be paid on entry to the pool along with the permission note.

If this payment is a problem please contact Renee Kirkpatrick or Brenton Mikk

on 61420800. Spectator fee for parents, carers and siblings is \$3.00.

Food: Please bring your own food, there will be a canteen at the pool also to purchase

food.

Clothing: Swimmers, wide-brimmed hat, sunscreen, sun-protection clothing in house

colours, water

## Safety/Emergency procedures

If needed, the school can be contacted at Big Splash, Jamison (62511144). In an emergency the school has access to all pool facilities and the appropriate emergency services.

It is important that staff are aware of your child's swimming ability prior to the event. Please ensure you carefully complete the attached permission note indicating your child's swimming ability.

**Kind Regards** 

Phil Beecher

School Principal

| Permission for Swimming Carnival Activities |  |  |  |  |  |  |
|---|--|--|--|--|--|--|
| there is                                    | rs are required to assess the swimming ability of every child they take on an excursion where swater for swimming or aquatic activities. This is called the <b>Survival Challenge Proficiency</b> is a part of this assessment and to help ensure the safety of your child, please provide the ng information: |  |  |  |  |  |
| 1.  | Name of Child:   |  |  |  |  |  |
| 2.  | School Year:   |  |  |  |  |  |
| 3.  | My child can swim:   |  |  |  |  |  |
|   | Yes  |  |  |  |  |  |
| 4.  | Distance my child can confidently swim:  |  |  |  |  |  |
|   | 10m  |  |  |  |  |  |
|   | 25m  |  |  |  |  |  |
|   | 50m  |  |  |  |  |  |
|   | 100m   |  |  |  |  |  |
| 5.  | I agree/do not agree to my child taking part in swimming / aquatic activities associated with this excursion.  |  |  |  |  |  |
| Name o                                      | of Parent / Carer: (please print)  |  |  |  |  |  |
| Signatu                                     | re:  |  |  |  |  |  |
| Date: _                                     |  |  |  |  |  |  |

The **Survival Challenge Proficiency Test** is a five step process. A student will be deemed a <u>proficient swimmer</u> if they can:

- 1. Perform a slide-in-entry and walk through 5 metres of water with acceptable stability and co-ordination
- 2. Swim continuously for 25 metres using an action that resembles a stroke
- 3. Perform survival skull, float or tread water for 1 minute in deep water. Call for help once within the minute
- 4. Exit water unassisted, and
- 5. Perform a voice rescue to a buddy who is pretending to be in trouble. Reassure the victim and encourage them to a point of safety. Call for assistance.

## **Canberra High School Swimming Carnival**

| Permission Note  | Ledger Code:  |
|--|---|
| I give permission for my child   | in ACE GROUP  |
| to attend the Canberra High School swimmi  | ng carnival at Big Splash on 09/02/18, making their way   |
| to and from the venue.   |   |
| □ I have enclosed \$14 for the event.  |   |
| Arrangements for Non-Proficient Swimmer  | rs, Code of Conduct and Parental Agreements:  |
| designated at the pool venue. When non- pi   | rities for non-proficient swimmers will be identified and roficient students enter the water for activities they will I in small groups with a maximum ratio of 1:10.   |
| their charge to protect them from injury and<br>Unacceptable behaviour will be treated as in | will take all reasonable care while the students are in d to control and supervise their behaviour and activities. It is normally treated at school, (reminders, time out in a vity) but with the additional factor that the student may be extreme or overly persistent. |
| which may occur on an excursion where, in  | s are not responsible for injuries or damage to property all circumstances, staff have not been negligent. Parents es, to others and to property, of impulsive, wilful or   |
| discussed with my child the need for sensil<br>make arrangements for the welfare of m        | vimming/aquatic activities mentioned previously. I have ble behaviour on this excursion. I authorise the school to by child (including medical or surgical treatment) in an ciated costs. I have provided to the school all medical this event.                           |
| that the school is authorised to return m considers that circumstances warrant such          | hority of the school for the duration of the excursion and y child to school or home at my expense if the school action. I give permission for my child to travel by private an emergency. I agree to provide any relevant medical  |
|  |   |
| Name of Parent / Carer: (please print)   |   |
| Signature:   |   |
| Date:  |   |

This form requests information about students which will be held by the school. This information may be disclosed to government or private medical or para-medical staff and other relevant officers in the event of an accident or emergency. The information is collected as a lawful administrative function of the ACT Education and Training Directorate.