



EXCURSION INFORMATION

<u>Name of Excursion:</u> ACT Secondary Swimming Carnival	<u>Date of Excursion:</u> Wednesday 9 th May 2018
<u>Venue:</u> AIS Pool, Bruce	<u>Times:</u> Warm up from: 8:15am – 8:45am Starts: 9am Finish 3pm
<u>Transport:</u> Students are required to make their own way to and from the venue.	<u>Accompanying Staff:</u> No supervision will be provided. Parents or guardians must supervise student at the competition
<u>Equipment Required:</u> <ul style="list-style-type: none">• plenty of water• lunch• SHAPE uniform• Swimming gear• Cap• Goggles.	<u>Other information:</u> The entry fee is \$8 per student to cover venue hire and officials. All money needs to be paid to the front office to ensure registration in competition.

The accompanying staff member/s will take all reasonable care while the students are in their charge to protect them from injury and to control and supervise their behaviour and activities.

Parents should be aware that staff members are not responsible for injuries or damage to property, which may occur on an excursion where, in all circumstances, staff have not been negligent. Parents should inform children of the risk to themselves, to others and property, of impulsive, wilful or disobedient behaviour. All students attending will be expected to give their full commitment to ensuring that the excursion is enjoyable, safe and successful for everyone concerned. We expect that the students behave responsibly at all times, and that ***any misconduct will be treated seriously and may require offending students to be sent home at the cost to the parents / guardians.***

Parents are more than welcome to attend sporting events as spectators, but may assist only when invited to by a school representative.

A Medical Information Form & Permission Note is enclosed. Please complete and return them to school as soon as possible.

The following are the recognised players' Code of Conduct that students should be aware of:

- Be a good sport.
- Play for enjoyment.
- Work hard for your team as well as yourself.
- Treat all teammates and opponents, as YOU would like to be treated.
- Play by the rules.
- Control your behaviour on and off the field.
- Learn to value honest effort, skilled performance and improvement.
- Cooperate with your coach, officials, teammates and opponents.
- Respect and abide by officials' decisions.

Phil Beecher
School Principal

Graeme Lambert
SHAPE Executive Teacher

PERMISSION NOTE and MEDICAL INFORMATION

Please return this sheet, filled out front and back and with appropriate signatures as soon as possible

I give permission for my child / ward

To participate in the ACT Swimming Carnival
On Wednesday 9th of May at the AIS Pool, Bruce

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

Full name of Parent/Guardian (please print)

Signature of Parent/Guardian **Date**

Medical concerns the teacher needs to be aware of for the day:

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Contact number for the day in case of an emergency:

I (Student) have read and understood the code of conduct and agree to represent the school, my peers and self in a respectful manner.

While on the excursion, I will be absent from the following classes. I understand that I will need to catch up on the work I will miss due to being on this excursion.

Excursion details	Period 1	Period 2	Period 3	Period 4	Period 5

Full name of student (please print).....

Signature of Student **Date**

FEE CODE: SSSASWIM

EXCURSION TITLE: ACT Secondary School Swimming Carnival

PAYMENT OPTIONS

1.Payment in person at school Front Office-between 8:15am & 2:30pm Mon-Fri
EFTPOS facilities are available. Cheques made payable to Canberra High School

2.Direct Deposit: Bank: Westpac
BSB: 032777 Acc. No. 001113
Acc. Name: Canberra High School

3.Canberra High School Website: www.canberrahs.act.edu.au
(QUICKWEB)

4.Phone Payments – Credit cards Phone: 61420800 or 61420807

Please debit my Mastercard Visa

Card Number: - - -

Card Expiry Date: _____ Name on card: _____

Parent/Carer: _____ Student Name: _____

Total Amount Paid: \$ _____

Cardholders Signature: _____

Contact Phone number of Cardholder: _____

NB: For direct deposits please ensure you specify the student name and excursion name as a reference

Refund Policy: If a student and/or parent has made a financial commitment to an excursion and if the student is unable to attend for any reason (except in the case of sudden illness), the student and/or parent is entitled to a refund of money paid minus any non-refundable financial outlay that the school has made on behalf of that student. The school will endeavour to find a replacement for that student, in which case, all money will be refunded. The usual appeal provisions apply.