

Jackson Avenue Winthrop WA 6150 Tel (08) 9310 6100 Winthrop.ps@education.wa.edu.au

FACTION SWIMMING CARNIVAL 2018 Year 4 - 6

Dear Parents,

Your child has qualified to represent the school in the **Faction Swimming Carnival** to be held at the Melville Aquatic Centre, Marmion Street, Booragoon on **Thursday 15th March 2018**. The children will depart school at 11.45am and return to school by 3.00pm. Supervision will be provided by Mr Dickinson and supervising teachers.

Students can wear their bathers under their school uniform or get changed at the pool.

The cost of entry and bus fare is \$13.00 per child, payable to the **Front Office**. Our preferred method of payment would be via the **Qkr App**. Cheques should be made payable to Winthrop Primary School. Please complete the attached permission slip and payment form and return with the \$13.00 to school by **Wednesday 14**th **March 2018**.

Spectator entry is via Melville Aquatic Centre front reception – entry fee is \$2.40

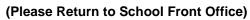
Parents are welcome to come along and support the children. A programme of events will be posted on a display board outside the sports shed. If you have any further queries, please contact Mr Cianfrini.

School Refund Policy Excursion/School Based Activity - School extra cost optional activities eg. Excursions/School Based Activity, camps, are undertaken by the school on a self supporting cost basis. If you have paid for an activity and your child is unable to attend, please notify the school as soon as possible. If the school has incurred a cost/s for an activity on behalf of a student this will be deducted from any refund.

Kind regards

Albert Cianfrini March 2018







Winthrop Primary School

PARENT/GUARDIAN CONSENT - FACTION SWIMMING CARNIVAL

	Year Lev	/el R	Room No
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	(FULL NAME)		
tha	am aware that any costs incurred as a result of accident hat school staff are not responsible for any loss or dama hat may occur during the course of the excursion.		
my tha	agree to inform the organisers before the scheduled exc ny child's health and fitness so that appropriate supervision hat, should it be considered necessary, school staff we nedical assessment.	on may be arran	ged. I acknowledge
Sig	SignedParent/Guardian	Date	
Pa	Parent Contact Phone Parent Mo	bile Phone	
En	Emergency Contact Number (other than parent) (1)	(2	2)
(Please Return to School Front Office) Winthrop Primary School Payment Slip			
St	Student's Name:	Yr Level	Rm No
			Amount Payable
FA	ACTION SWIMMING CARNIVAL		\$13.00
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