SCHOOL EXCURSION
PARENT OR CAREGIVER INFORMATION AND CONSENT FORM

Dear parent or caregiver,

Your child has been selected to represent Oaklands Central School in its Swim Team for Balldale District Swimming Carnival 2012.

Venue: Corowa Swimming Pool.
Date: Monday, 27th February 2012.
Time: 9:30am sharp
Transport: Parental
Cost: Entry to the pool is $2.40 for a student and $2.50 for an adult. Please have your money ready for the management to collect when you enter the pool. There is a PSSA Levy - $2.50 per student to be paid to the school office prior to the day.
Food: Bring own recess and lunch for the day. It is better to eat small snacks all day if you are swimming a lot. There will be no set lunch break.
Water: Bring your own and plenty of it.
Wear: OCS Sports uniform and hat.
Bring: Towel and sunscreen, maybe a tracksuit too if it’s “cold”?

Hat and shirt must be worn at all times when not swimming.

OCS has two lanes to time for the day. Please let me know if you are not available to be on the roster for the lanes. It will be in 30 minutes intervals.

Transport will be parental. Please arrange this between yourselves and let me know if you need help with transport.

This excursion has been planned to supplement the following work being done in the classroom: Sport

The staff members with emergency care training are Ms Outram and Mrs Gorman.
The staff members with CPR training are Ms Outram and Mrs Gorman.
Accompanying staff are Ms Outram and Mrs Gorman.

Water or swimming activities - advice
The excursion will involve the following water or swimming activities: Balldale Swimming Carnival Program of Events.
These activities will take place at: Corowa Swimming Pool.
The school will provide the following flotation devices to students who may require assistance in the water: N/A.

Margot Gorman
Excursion co-ordinator

Vicki Harris
Principal

Date: 21/2/2012
Please return to Oaklands Central School by Thursday, 23rd February 2012.

Complete or delete as appropriate:

**Privacy - advice**

The information provided on ................................................................. is being obtained for the purpose of ascertaining relevant medical information, requirements and other health care related needs about ................................................................. who is currently enrolled at the school and who may participate in school excursions, sporting activities or other educational or school activities conducted by or in conjunction with Oaklands Central School.

It will be used by officers of the NSW Department of Education and Training to assist planning, to support students, and to minimise risks when conducting school excursions, sporting or other school activities.

Other persons or agencies that may be provided with this information include, but are not limited to, volunteers and members of external organisations who join with the school or are otherwise involved in the planning or delivery of the excursion, sporting or other school activity; and persons that may be called upon to provide health care treatment or other assistance during or as a consequence of such excursions or activities.

Provision of this information is not required by law. However, a failure to provide the information may mean that your child can not participate in a particular excursion or school activity. In such circumstances the school will make available a sound alternative educational experience.

Provision of this information will significantly assist the school in planning a safer educational activity. It will be stored securely. If you have any concerns about provision of this information, please contact the school principal to discuss further.

You may correct any personal information provided at any time by contacting the school office.

**Water or swimming activities - response**

In relation to the proposed water or swimming activities, I advise that my child is a: *(please tick one)*

- [ ] strong swimmer
- [ ] average swimmer
- [ ] poor swimmer
- [ ] non-swimmer

I advise that my child requires the following flotation device to assist him/her in the water:

N/A ............................................................................................................................

I undertake to provide this device so that my child can participate in the excursion. Yes / No   N/A

I give permission for my child to participate in the water or swimming activities.

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**2012 Balldale Swimming Carnival at Corowa**

I do / do not consent to ................................................................. participating in an excursion to the Balldale Swimming Carnival at Corowa on Monday, 27th February 2012.

The cost of the excursion is: $2.50 PSSA Levy per student to be paid to the school and $2.40 entry per student to be paid on arrival.

My son / daughter has the following special needs (please provide full details and include any relevant medical details)

I give permission for my child to receive medical treatment in case of emergency.

I am available / unavailable for timekeeping on a lane during the day.

Signature ___________________________ Date ___________________________