



ASCOT VALE PRIMARY SCHOOL
No.2608

AVPS Swimming Team Trials

Friday 2nd February 2018

Dear Parents and Caregivers,

Ascot Vale Primary School will be entering the District Swimming Sports again in 2018. Students in grade 3, 4, 5 and 6 (must be turning 9 or older in 2018) will be eligible to try out for the events. **All events are 50 metres.**

We will be holding trials at the **Queens Park Outdoor** Swimming Pool, starting at **7:30 am sharp** on **Thursday 15th February**. Parents will be required to remain at the pool or organise for their child to be cared for by another adult and taken to school at 9.00am or on completion of their trials.

In turn, if your child is unable to attend I am happy to accept his/her 50 metre time for the events they wish to try out for from their swim coach (signed, dated and with a contact phone number).

At the carnival there is a maximum of two events per child- freestyle, backstroke, breaststroke and butterfly. Students CAN try out in all four strokes on the 15th of February if they wish. The district Carnival is planned for Friday 2nd of March (weather permitting) and students selected to represent AVPS will be notified a week in advance. A charge of \$8.00 is required to tryout. This covers entry to the pool and exclusive lane hire.

If you have any questions about you child trying out for the AVPS swim team, please do not hesitate to contact me.

Yours sincerely,

Britt Stephenson

Health and PE Co-ordinator

As this is NOT compulsory for all students, the cost of the lane/pool hire is not covered by the *Students Excursion of Sports Levy*. The cost to participate in the trials is \$8 per child and MUST be paid in cash please.

(If your child is selected to represent AVPS at the District event, please be mindful that a payment for the bus and staffing will also be required)

PLEASE RETURN PERMISSION SLIP OVERLEAF AND \$8 in a labelled envelope to classroom teachers by NO LATER THAN FRIDAY 9th OF FEBRUARY 2018.

2018 AVPS Swimming Team Trials Permission Form

I give permission for my child _____ in Unit _____ to attend the Swimming Trials at Queens Park Pool on 15/2/2018. In the event of an accident or injury I give permission for the teacher in charge (Britt), where it is impractical to communicate with me, to authorise for my child to receive such medical treatment as may be deemed necessary.

I understand that my child needs to be supervised by a parent while at the trials and will need to be taken to school after the trials.

Parent Name:

Parent Signature..... Date.....

Emergency Parent Phone Number on day of activity/excursion:

Does your child suffer from a medical condition and/or require medication on the day of the activity/excursion?**Yes/No:**

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(office use only: Please send this note to Britt Stephenson)