



Southern Metro Regional Athletics Carnival 2022

Your child _____ has qualified to represent CSPS at the Casey South Division Athletics carnival in the following event/s:

Date:	Wednesday, 19 October 2022
Venue:	Casey Fields Athletics Track- 160 Berwick-Cranbourne Rd.
Time:	9am to 2.30pm - please refer to the program for the day and ensure you are there at least 30 minutes prior to your scheduled event time.
Event Information:	<u>Please see attached the running sheet for the day</u> - note all times are subject to change. The objective of the Regional carnival is to select students to participate in the State Athletics carnival.
Permission:	Both QKR permission and travel arrangements are due by Wednesday, 12 October 2022.
Transport:	Parents/carers are required to provide transport for their child on this day due to the small number attending from our school. If you require any assistance with this please indicate on the form below.
What to wear:	<ul style="list-style-type: none"> • Suitable running shoes • Shorts (with no pockets) • School Polo (<i>Students will be provided with a Cranbourne South Sports Singlet</i>)
What to bring:	<ul style="list-style-type: none"> • Food for the day (fruit, snacks and lunch) • A water bottle (it would be a good idea to pack more than one) • School hat and sunscreen • Protective clothing & a change of clothing in case of extreme weather conditions
Supervision:	Parents/Guardians will be responsible for supervising their child at the venue at all times.

DANIELLE CURTOIS

Physical Vibe

Wednesday, 5 October 2022



PLEASE RETURN BY **Wednesday, 12 October 2022**

Southern Metro Regional Athletics Carnival - Casey Fields Athletic Track

I give permission for my child: _____ Class: _____
to participate in the **Southern Metro Regional Athletics on Wednesday, 19 October 2022.**

I will provide transport for my child to and from the venue.

I am willing to provide transport for other students. My contact details are: (This information will be provided to other parents)

Mobile/Ph: _____

I am unable to transport my child but I am happy for another parent to do so and I understand that this is a private arrangement between the parents concerned.

If you tick this box, we will send you the names and phone numbers of parents who have agreed to transport other students to this event.

In the event of illness or injury to my child whilst on this excursion, I authorise the Principal or teacher-in-charge of my child, where the Principal or teacher-in-charge is unable to contact me, or it is otherwise impracticable to contact me to consent to my child receiving such medical or surgical attention as may be deemed necessary by a medical practitioner, and to administer such first aid as the principal or staff member may judge to be reasonably necessary.

During the times of the excursion, my telephone contact is: _____

Print Name of Parent/Guardian

Signature of Parent/Guardian

Date