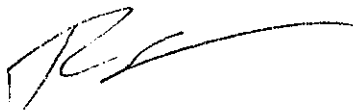


## Excursion INFORMATION

**Please complete and return the attached consent form to the administration office by the Thursday 6 March.**

Dear parent/guardian,

- Students who qualified for the Zone Swimming Team will be going on an excursion to Sydney International Aquatic Centre - Olympic Park on Monday 10 March 2025 to represent GTHS and the Sutherland Zone at the Sydney East Swimming Championships to gain qualification to compete at the NSWCHS Carnival.
- The cost of the excursion is \$15 per student which is to be paid to the administration office by Thursday 6 March. This cost covers the Carnival Levy and pool entry for competitors and supporters.
- Zone Swimming Team members will need to arrive at SOPAC on Monday 10 March for an 8:00 AM start. Warm ups from 7:30am and 7:45am marshalling for the first events. Students may leave with their parents following their final event.
- Travel will be by own travel arrangements.
- Accompanying staff are: R.Ellis
- Sport Uniform is to be worn to this excursion. Students competing in individual events will receive a Sutherland Zone Swim Cap from the Zone Manager to wear in their events. Relay Teams are to wear GTHS (Black) Swim Caps.
- The excursion will involve the following water or swimming activities: Carnival races. These activities will take place at Sydney International Aquatic Centre. The school will provide the following flotation devices to students who may require assistance in the water: NA.
- The contact number during the excursion is 9521 3244.



R.Ellis  
Coordinator



Mrs V.Koukoutaris  
Deputy Principal

# Permission Note for Sydney East Swimming Carnival 2025 on Monday 10 March 2025

Please complete and return this consent form to the administration office by the Thursday 6 March.

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## CONSENT

I hereby consent to ..... in Year ..... participation in an excursion to Sydney International Aquatic Centre - Olympic Park on Monday 10 March 2025.

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## SPECIAL NEEDS

Special needs of my child which you should be aware (eg. allergies, medication - please provide full details)

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## MEDICAL

I give permission for my child to receive medical treatment in case of emergency. YES / NO (please circle)

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## SWIMMING

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:.....
- I undertake to provide this device so that my child can participate in the excursion. Yes / No
- I give / do not give permission for my child to participate in the water or swimming activities.

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Signature of Parent/Guardian

Name of Parent/Guardian

Date

## Privacy Advice

The information provided on this consent form by the parent or caregiver is being obtained for the purpose of conducting a school excursion detailed above. It will be used by the NSW Department of Education for seeking consent for the child to undertake activities within this excursion activity. Provision of this information is required by law / voluntary. It will be stored securely. You may correct any personal information provided at any time by contacting the school on 9521 3244

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## PAYMENT

Payment for Sydney East Swimming Carnival 2025. Student Name: \_\_\_\_\_

I have made a payment online of \$15 for this excursion.

For online payments please go to the school's website at <https://gymeaths.nsw.edu.au> to pay through schoolbytes. Choose Payments and then choose the selected excursion from other items.

**Sydney East Swimming** Amount: **\$15**

I have made a payment at the school office of \$15 for this excursion. (Payment made by cash or card)