



## Sporting Event Information

### St John Paul II Catholic College Athletics Carnival

### Monday, 22 May 2017

1 May 2017

Dear Parents/Caregivers,

Following are the details of an event that has been approved by the College Leadership Team.

Please read the information listed below, discuss the details with your child and then if there are no questions or concerns please complete the Permission Slip/Medical Information Form and return it to the organising teacher via the College Office no later than Monday, 8 May 2017.

<b>Name of Organising Teacher:</b>	Mr C Chapman
<b>Carnival Date:</b>	Monday, 22 May 2017
<b>Venue Name:</b>	Blacktown Olympic Park
<b>Address/Location:</b>	Eastern Road, Rooty Hill
<b>Why students should attend:</b>	This carnival is compulsory for Years 7 - 12. All students that attend the carnival are required to compete in at least two events on the day.
<b>The cost of the event is:</b>	No Cost
<b>Starting point and time:</b>	Schofields Campus and then Nirimba Campus, 8.00am
<b>Finishing point and time:</b>	Nirimba Campus and then Schofields Campus, 2.15pm
<b>Transport details:</b>	Any students wanting to be collected directly from the venue will need written permission on the day of the carnival.
<b>Students are to wear:</b>	Full College Sport Uniform
<b>Additional Parent Details:</b>	<p>If your child has extenuating reasons why they may not be able to attend, you need to contact the College prior to Monday, 15 May 2017 to discuss this matter.</p> <p>Parents/Caregivers are invited to attend the carnival and support the efforts of the students competing. Thank you for your support and we look forward to another successful athletics carnival.</p> <p>Please note: Students who are absent on the day will be followed up if prior discussion with the College has not occurred.</p>
<b>Emergency contact details:</b>	If Parents/Caregivers need to contact their child urgently or should your child not be home when expected please contact the organising teacher on 0447 277 254 (Sport Coord) or the College on 9208 7200.
<b>Sport Information Line Details:</b>	In the case of wet weather please contact the Sports Information Line (9208 7265) for further details



**PERMISSION / MEDICAL INFORMATION FORM**  
**St John Paul II Catholic College Athletics Carnival**  
**Monday, 22 May 2017**

(To be completed by Parent/Caregiver and returned to the organising teacher via the College Office no later than Monday, 8 May 2017).

I give permission for my child \_\_\_\_\_ of Homeroom \_\_\_\_\_ to attend the above excursion at Blacktown Olympic Park, Eastern Road, Rooty Hill.

Please tick necessary boxes

- ☐ I have completed the Medical Information Form below and I have read and understand the information regarding this carnival.
- ☐ I understand that students must wear full College Sport Uniform.
- ☐ I understand that this is a compulsory Carnival and my son/daughter must make their own way to and from the College or as indicated below:

\_\_\_\_\_  
Parent/Caregiver Signature

\_\_\_\_\_  
Date

**MEDICAL INFORMATION**

Student full name: \_\_\_\_\_ Date of birth: \_\_/\_\_/\_\_,

- ☐ In case of an emergency, where medical assistance or treatment is required, I authorise the College to arrange for such assistance as is necessary.

<b>Teachers Name:</b> Mr Layn Mellish	
<b>Student Name:</b>	<b>Homeroom:</b>
<b>Address:</b>	
<b>Date of Birth:</b>	<b>Age at 2017 Birthday:</b>
<b>Home Telephone Number:</b>	
<b>Parents/Caregivers Work Telephone Number:</b>	<b>Parents/Caregivers Mobile Number:</b>
<b>Emergency Contact Phone Number:</b>	
<b>Family Doctor Name:</b>	
<b>Family Doctor Phone Number:</b>	
<b>List of any medications your child will be taking on the day:</b>	
<b>Medicare Number:</b>	<b>Private Health Fund:</b>
<b>Pre-existing illness/medical condition/injury/allergies:</b>	