



## 2017 District Cross Country

Monday 24<sup>th</sup> April 2017

Dear Parents/Guardians,

Your child has been selected in the Beaconsfield Primary School Cross Country Team to compete at the School Sport Victoria Pakenham District Cross Country on Friday 12<sup>th</sup> May. The events will start at 9:45am sharp and the final event will take place at approximately 10:30am.

- When:** Friday 12<sup>th</sup> May.  
**Time:** The students will be leaving school at 9:00am sharp. As per our Excursion Policy we will wait no longer than five minutes after the stated departure time. Students who arrive later than this will stay at school. We will return to school by 11:30am.  
**Where:** Toomuc Recreation Reserve, Olympic Way, Pakenham, Melways Ref. 215 K5  
**Transport:** By bus  
**Cost:** \$6.00 for hire of bus and event entry. Please note that the cost of this event has been calculated on the bases of all eligible children attending. If a number of children choose not to take their place in the team the cost may need to be revised upward.

**Special requirements:** Your child will need to bring appropriate clothing and shoes to change into; school uniform must be worn to and from the event. The students will need to bring a drink bottle, healthy snack, lunch and asthma medication if required.

**How can you help:** Parents who are available to assist with the supervision of the students are required to help with the smooth running of the event. Please let us know if you can help.

**Due date for notice and money:** Friday 5<sup>th</sup> May at 9:00am

Regards, Anthony Cole  
Physical Education Coordinator.

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(Please detach and return with money to school by Friday 5<sup>th</sup> May 9:00am)

### 2017 District Cross Country

Student's name: ..... Student's Grade.....

I enclose \$6.00 as full payment for the excursion.

Method of Payment (please tick):

Cash  Chq  Bpay

I consent to my child taking part in the **School Sport Victoria Pakenham District 2017 Cross Country** and where the teacher in charge of the excursion is unable to contact me, or it is otherwise impractical to contact me, I authorise the teacher in charge to:

- Consent to my child receiving such medical or surgical attention as may be deemed necessary by a medical practitioner,
- Administer first-aid as the teacher in charge may judge to be reasonably necessary.

Contact number for this excursion: .....

Signature of parent/guardian: .....

Date:.....

The Department of Education and Training requires this consent to be signed for all students attending school excursions.

I am able to help at the School Sports Victoria Pakenham District Cross Country on Friday 12<sup>th</sup> of May 2017 and **I have a current Working With Children Card registered with Beaconsfield Primary School.**

Name ..... Contact Phone Number .....

Working with Children's card Number.....