

JESMOND PUBLIC SCHOOL

Diversity Opportunity Success

Ralph Street Jesmond NSW 2299 www.jesmond-p.school.nsw.edu.au jesmond-p.school@det.nsw.edu.au 02 4957 2605

Friday 9th February

2024 Swimming Carnival

Event details

Our 2024 Swimming Carnival is on Tuesday 20th February. Students that are turning 8 years or older will be transported to Mayfield Pool by bus. For confident swimmers, there will be 50m races to complete in. After assessment, students will be given the opportunity to swim in a 25m race if suitable. All other students will participate in water safety activities in the shallow pool. Parents and carers are welcome to join us!



Sport:	Swimming Carnival				
Date:	Tuesday 20 th February				
Start time:	10:00am				
Finish times:	1:15pm				
Venue:	Mayfield Swimming Pool				
Cost:	\$15				
What to wear:	Swimmers underneath school uniform, hat, enclosed shoes.				
What to bring: (including any personal protective items)	Swimmers, towel, goggles (optional), spare clothes, rash shirt.				

Transport details

Transport arrangements:	Students will travel by bus from Jesmond Public School to Mayfield Swimming Pool with staff members
Time of departure:	Bus 1: 9:15am Bus 2 10:00am
Time of return:	Bus 1: 1:15pm Bus 2: 12:30pm

Coordination teacher details

Return consent note and payment to:	Classroom teacher
Further inquiries (please contact):	Ms Ulrika Sandberg or Miss Sophie O'Brien

Payments can be made online, via EFTPOS at the school office or in cash to the class teacher. If paying cash please provide correct money as change is unable to be given. Please return payment and signed permission notes to school by Thursday 15th February

If this event is postponed for any reason details can be found on the Jesmond Public School Facebook page - <u>https://www.facebook.com/JesmondPS</u>

Organising Teachers	Principal
Sophie O'Brien and Ulrika Sandberg	James McGill

Concussion Clearance

The Australian Medical Association recommends students being symptom free of concussion for 14 days before returning to sport.

- If your child/ward sustains a concussion, or experiences any concussion symptoms, in the 14 day period prior to the event commencing, you must report this to team officials, and a medical clearance is required in order for your child/ward to participate in the event.
- Medical clearances can be attached to this consent form or can be submitted to team officials separately.

In the event of injury, no personal injury insurance cover is provided by the NSW Department of Education for students in relation to school sporting activities, physical education lessons or any other school activity. The Department's public liability cover is fault-based and limited to breaches by the Department of its duty of care to students that may result in claims for compensation.

Parents/Carers are advised to assess the level and extent of their child's involvement in the sport program offered by the school, school sport zone, region and state school sport Associations when deciding whether additional insurance cover is required prior to their child's involvement in the program. Personal accident insurance cover is available through normal retail outlets.

Parents/Carers who have private ambulance cover need to check whether that cover extends to interstate travel and make additional arrangements, as considered appropriate.

The NSW Supplementary Sporting Injury Benefits Scheme, funded by the NSW Government, provides limited cover for serious injury resulting in the permanent loss of a prescribed faculty or the loss of use of certain prescribed parts of the body. The Supplementary Scheme does not cover medical costs or dental costs. Further information can be obtained from https://www.icare.nsw.gov.au/injured-or-ill-people/sporting-injuries/payments/#gref. Further information regarding student accident insurance and private health cover is provided at: https://app.education.nsw.gov.au/sport/file/1449.



----- please return this part to school ------

Student details (please print cle	arly)			
First name:	Surname:			
Class:				
Student Code of Conduct (STUD	ENT TO COMPLETE WITH PARENT)			
I (name)	agree	to abide by all the rules of the		
events and to obey all requests a events. Misbehaviour has seriou	given to me. I realise that good behaviour will s consequences.	l enable me to take part in future		
SIGNED:Stude				
Stude Student medical details	nt	Date		
Medicare number:	Exp	iry date:		
	cial needs which the team manager should be r specialised plans. (Copies of plans to be atta	-		
Parent/Carer details				
First name:	Surname:			
I give permission for my child/wa	ard			
of Class to a	ttend and participate in the:			
Event: 2024 Jesmond Public Sc	hool Swimming Carnival			
Date: 20/2/2024	at Venue: Mayfield Swimming S	at Venue: Mayfield Swimming School		

Permission to Publish student information

The Department of Education may publish or disclose information about your child/ward for the purposes of event promotion and sharing results. This information may include your child/ward's name, age and school. It may also include information collected during this event such as photographs, live streaming, sound and visual recordings of your child/ward.

The communications in which you child/ward's information may be published or disclosed include but are not limited to:

- the event program and results
- public websites of the Department of Education including the School Sport Unit website
- the Department of Education intranet (staff only), blogs, and wikis
- Department of Education publications including the school newsletter, annual school magazine and school report, promotional material published in print and electronically
- the Department of Education, School Sport Unit and school social media accounts on networks such as YouTube, Facebook and Twitter
- local and metropolitan newspapers and magazines and other media outlets.

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Parents/Carers should be aware that when information is published on public websites and social media channels, it can be linked to by third parties and may be discoverable online for a number of years, if not permanently. Search engines may also cache or retain copies of published information.

Permission to Publish: I have read the information about disclosing and publishing student information (above) and

I give permission

I do not give permission

for the Department to publish and disclose information about my child/ward in publicly accessible communications. This permission remains effective until I advise otherwise.

I understand that if I have not given permission to publish, my child/ward's name will not appear in event programs and results.

SIGNED: _____

Parent/Carer

Date

Parent/Carer Acknowledgment and Consent

- I have read the information provided and I hereby consent to my child/ward participating in this event.
- I acknowledge that this event/activity is required to be held in accordance with any current NSW Health COVID-19 Public Health Orders and the NSW Department of Education's policies and procedures.
- I acknowledge and accept that there is a risk that my child/ward may be exposed to COVID-19 whilst attending and participating at this event.
- I confirm that my child will not attend if displaying symptoms of illness, and/or if directed to isolate under public health orders.
- I acknowledge that my child/ward will be under the duty of care of the supervising teacher during the event.
- I acknowledge that if my child/ward seriously contravenes behavioural expectation, they may be immediately excluded from the team. Should this eventuate, I accept full responsibility for my child/ward upon notification of their exclusion by the team manager including the cost return transport and accommodation.

- In the event of any accident or illness, I authorise the obtaining, on my behalf, of an ambulance and any such medical assistance that my child/ward may require. I accept full responsibility of expenses incurred.
- I can confirm that I understand that, in the event of injury, no personal injury insurance cover is provided by the NSW Department of Education for students in relation to school sporting activities, physical education lessons or any other school activity. (Personal injury statement)
- I acknowledge that if my child/ward sustains a concussion, or experiences any concussion symptoms, in the 14-day period prior to the event commencing, I am required to report this to team officials. I further acknowledge that, should this occur, my child/ward will only be permitted to participate in the event, if a medical clearance is provided.
- I affirm that, to the best of my knowledge, my child has no medical condition or injury that places them at risk by participating in this sport activity.
- I can confirm I have completed the "Permission to Publish student information" section.

Name:			
SIGNED:			

Parent/Carer

Date

Parent/Carer Consent Structured Aquatic Activities

Advice

This excursion will involve structured aquatic activities: These activities will take place at: Mayfield Swimming Pool

Response

In relation to the proposed structured aquatic activities (please circle response):

My child is **permitted** to go in the water.

My child is **not permitted** to go in the water.

SIGNED:

Parent/Carer

My child is permitted to go in the water (please circle response):

A non-swimmer: My child is unable to swim.

A weak swimmer: My child is comfortable and confident in shallow water but cannot swim very well.

An average swimmer: My child is a reasonable swimmer but is not very strong or confident in deep water.

A strong swimmer: My child is a strong swimmer and is very confident in deep water.

SIGNED:

Parent/Carer

Date