

# Cardiff High School

*Celebrating Excellence, Opportunities and Success.*

30 Boronia Street, Cardiff NSW 2285

Ph (02) 4954 9966

Email [cardiff-h.school@det.nsw.edu.au](mailto:cardiff-h.school@det.nsw.edu.au)

Website [www.cardiffhigh.com.au](http://www.cardiffhigh.com.au)

## **YEAR 7 SPORT TERM 1 2018**

During TERM 1 Sport (Wednesday afternoon), Year 7 will be participating in a **Compulsory Aquatics Program**, commencing **Wednesday 31st January 2018 and every following Wednesday**. The program aims to increase water confidence, swimming ability and teach essential lifesaving and survival skills. Students will complete a mandatory Department of Education water test and then split into groups based on ability. Weeks 1-4, students will be bused to Aqua Stars Swim Centre (non-swimmers and weak swimmers), Eastlakes Swim Centre (lower to middle ability swimmers) and Mereweather Baths (competent swimmers). After Week 4, all competent swimmers will be go to Speers Point swimming pool.

Students are to make their way immediately to the bus bay at 12.40pm on a Wednesday, when period 3 finishes. Students should change into their swimmers and eat their lunch during the long 1<sup>st</sup> break between periods 2 and 3. The buses will depart the school bus bay promptly at 12.50pm and as soon as students have boarded. Students will need to bring swimwear, sunscreen, goggles, towel, swimming cap (NOT compulsory) as well as dry clothes and underwear to return to school.

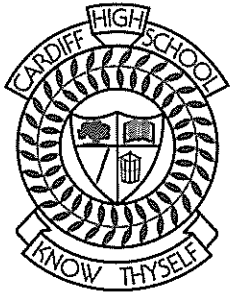
**The cost of the program is \$70, inclusive of pool entry and bus fees.** We realise this is an expensive time of year and students are encouraged to make regular payments if necessary at the front office or via the school website with the final payment being due Wednesday 28<sup>th</sup> February (**Week 5**). If there are any issues with payment, please contact Mr Swadling via email ([ty.swadling1@det.nsw.edu.au](mailto:ty.swadling1@det.nsw.edu.au)).

**Injury or Sickness** – If your child is injured or sick and unable to actively participate in the Aquatics Unit, you will need to provide **a note of explanation** which **your child will need to bring to Mr Swadling (PE STAFFROOM) prior to scheduled sport time**. If your child cannot attend for 2 weeks or more they will require a doctor's certificate.

Yours Sincerely

Mr T. Swadling  
Sport Coordinator

Mr G. Erskine  
Principal



# Cardiff High School

*Celebrating Excellence, Opportunities and Success.*

30 Boronia Street, Cardiff NSW 2285  
Ph (02) 4954 9966  
Email [cardiff-h.school@det.nsw.edu.au](mailto:cardiff-h.school@det.nsw.edu.au)  
Website [www.cardiffhigh.com.au](http://www.cardiffhigh.com.au)

*Please complete this entire page and return this page only to the PE staffroom by Tuesday 31 January. Program fees are to be paid to the administration office by 28 February 2018*

## **CONSENT**

I give permission for my child \_\_\_\_\_ (full name) to participate in the aquatics program being held on Wednesday afternoons commencing Wednesday 31 January to Wednesday 11 April 2018.

## **SWIMMING ADVICE**

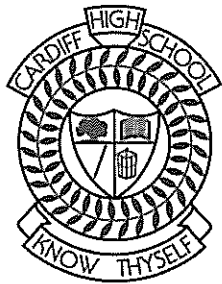
Your child will be tested for their aquatic capabilities but please indicate below (by circling) the swimming level of your child:

1. Can NOT Swim
2. POOR (Only confident in shallow water, no recognisable stroke)
3. AVERAGE (CAN SWIM 25m)
4. GOOD (CAN SWIM 25-50m without stopping)
5. VERY GOOD (Can swim over 50m easily)

Your child will be directly supervised by a Teacher possessing Emergency Care and CPR qualifications.

Signed \_\_\_\_\_ (parent/guardian signature)

Date \_\_\_\_\_



# Cardiff High School

*Celebrating Excellence, Opportunities and Success.*

30 Boronia Street, Cardiff NSW 2285

Ph (02) 4954 9966

Email [cardiff-h.school@det.nsw.edu.au](mailto:cardiff-h.school@det.nsw.edu.au)

Website [www.cardiffhigh.com.au](http://www.cardiffhigh.com.au)

## Excursion Permission and Medical Form

I hereby consent to my child (Full Name) \_\_\_\_\_ of (Roll) \_\_\_\_\_  
to participate in an excursion for Year 7  
to Community Pools/Mereweather Baths on Wednesdays 31/1/2018 - 11/4/2018  
organised by Mr Swadling.

I understand transport is via Private Bus,  
the cost of the excursion is \$70,  
payment due by Wednesday 28 February 2018 and students should wear School Uniform.

My child's mobile phone number is \_\_\_\_\_.

I am paying:

☐ Online via [www.cardiffhigh.com.au](http://www.cardiffhigh.com.au). Receipt number \_\_\_\_\_ Date paid \_\_\_\_\_.  
☐ At the school office.  
☐ At the venue.  
☐ N/A

I give permission for my child to receive medical treatment in the case of an emergency.

### Emergency Contact details:

#### First Contact

Name: \_\_\_\_\_  
Phone: \_\_\_\_\_

#### Alternate Contact

Name: \_\_\_\_\_  
Phone: \_\_\_\_\_

#### Doctor

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

#### Existing medical condition(s) or illnesses (please tick)

☐ asthma ☐ diabetes ☐ epilepsy ☐ other(s) \_\_\_\_\_  
☐ allergies to \_\_\_\_\_

**Medication(s) to be administered and / or treatment(s) for condition(s).** *Name of medication(s), instructions for administration, time(s), any possible reactions and / or outline treatments for condition(s).*

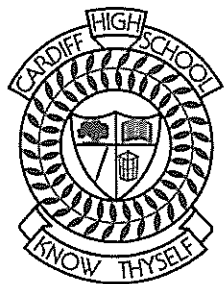
**Special needs or dietary requirements. Include possible reaction to inappropriate diet.**

The information you provide is being obtained for the purpose of ascertaining relevant medical information. For further information on the Privacy Policy see [www.cardiffhigh.com.au](http://www.cardiffhigh.com.au) Payments and Excursions.

Parent/Carer (print name): \_\_\_\_\_

Date: \_\_\_\_\_

Parent/Carer (signature): \_\_\_\_\_



# Cardiff High School

*Celebrating Excellence, Opportunities and Success.*

30 Boronia Street, Cardiff NSW 2285

Ph (02) 4954 9966

Email [cardiff-h.school@det.nsw.edu.au](mailto:cardiff-h.school@det.nsw.edu.au)

Website [www.cardiffhigh.com.au](http://www.cardiffhigh.com.au)

## Excursion Information for Students and Parents

Dear parent/caregiver,

Your child has been invited to attend the following excursion:

**Student Group:** Year 7

**Venue:** Community Pools/Mereweather Baths

**Purpose of Excursion:** Year 7 Mandatory Aquatics Program

**Date(s):** Wednesdays 31/1/2018 - 11/4/2018

**Departing from:** School Bus Bay

**Returning to:** School Bus Bay

**Transport:** Private Bus

**Attire to be worn:** School Uniform

**Cost:** \$70

**Payment Instructions:** Either online at [www.cardiffhigh.com.au](http://www.cardiffhigh.com.au) or the school office

**Payment Due by:** Wednesday 28 February 2018

### Additional Information:

Please see the attached information for further details.

**Organising teacher:** Mr Swadling

**Additional Staff:**

**Emergency Contact:** 49549966

It is expected that all students adhere to our code of behaviour at school and on excursions. Further information on the code of behaviour is available at [www.cardiffhigh.com.au](http://www.cardiffhigh.com.au), Payments and Excursions.

Please sign the attached permission and medical information form and return it with full payment to School Office by Tuesday 30 January 2018.

---

Mr Swadling  
Organising Teacher

---

Mr C Maher  
Head Teacher

---

Principal