6th December 2014

Dear Parent/Carer,

The Annual Inter-house Swimming Carnival, 2015 will be held on Monday 2nd February 2015 at the Chandler Aquatic Centre, Sleeman Sports Centre. This will be a whole school event and all students in attendance at school on the day will be transported by bus to the carnival and then back to Corinda in the afternoon. The school campus will be closed between the hours of 8:40am and 2:50pm on this day, all staff and students will be attending the event and classes will recommence the following day. This is an exciting school-wide event that will encourage great house-spirit with all events being held within the same arena a new format for this annual event. This is an inter-house competition and aims to facilitate selection in the school team to attend trials for the district and regional swim teams and encourage mass participation from all Corinda students.

| Activity details | Monday 2nd February 2015  
The Chandler Theatre (Aquatic Centre) at the Sleeman Sports Centre. |
<table>
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<tbody>
<tr>
<td>What the students will be doing</td>
<td>Swimming in individual and relay races. Spectating.</td>
</tr>
<tr>
<td>Where the students will be</td>
<td>All students will be in the Chandler Theatre and will not be permitted to leave this area for the duration of the day. Students can purchase food at Chandler or bring a packed lunch.</td>
</tr>
<tr>
<td>What the students will be using (hazardous materials, sporting equipment, tools, stove, etc)</td>
<td>Aquatic activities are considered High Risk for all participants. Control measure will be in place to support student safety.</td>
</tr>
<tr>
<td>Inherent risk level of the activity</td>
<td>Swimming is a high risk activity. Strict risk management procedures will be followed including the use of qualified lifesavers with first aid and CPR experience manning the pool deck at all times.</td>
</tr>
<tr>
<td>Activity Leaders</td>
<td>Carmen Anderson- Head of Department, HPE &amp; Sport Dana Eagers - Teacher, HPE &amp; Sport</td>
</tr>
<tr>
<td>Transportation</td>
<td>Students will travel by school arranged transportation (Murrays Coaches) to and from the venue. All students will depart by bus from Corinda SHS at 8:40am and return by bus no later than 2:50pm.</td>
</tr>
<tr>
<td>Any precautions to be taken</td>
<td>Seat belted bus. All swimming competitors must be able to swim at least 25m. The aquatic centre is indoors but hats and sunscreen are required whilst waiting for travel to and from the venues.</td>
</tr>
<tr>
<td>Dress code</td>
<td>Students can wear full school sports uniform as this is a full-day sporting event. Students will be given opportunities to change into swimmers and house colours once they have arrived at the venue.</td>
</tr>
<tr>
<td>Any information relevant to students with medical requirements</td>
<td>Students must advise of any relevant health or medical conditions impacting on their participation in this event.</td>
</tr>
</tbody>
</table>

Please note:
Cost – NIL (The cost of this event is covered in the student sports levy). If you wish for your child to participate in the activity, please complete the attached consent form and return to the Roll Room with payment no later than Friday 30th January 2015, permission notes will be accepted from Term 4, 2014.
There will be no lessons at school this day as all staff will be attending the event. NO PERMISSION NOTES WILL BE ACCEPTED ON THE DAY OF THE EVENT.
For further information about the activity including location directions if you would like to attend as a spectator please contact Dana Eagers on 33790222 or deage3@eq.edu.au.

Yours sincerely,

Helen Jamieson
Principal

Carmen Anderson
Head of Department- HPE & Sport
Privacy Notice
The Department of Education and Training is collecting the personal information requested in this form in order to:
- obtain lawful consent for your child to participate in the activity;
- help coordinate the activity;
- respond to any injury or medical condition that may arise during, or as a result of the activity; and
- update school records were necessary.

The information will only be accessed by authorised school staff and will be dealt with in accordance with the confidentiality requirements of s.426 of the Education (General Provisions) Act 2006 (Qld) and the Information Privacy Act 2009 (Qld).

The information will not be disclosed to any other person or agency unless it is for a purpose stated above, the disclosure is authorised or required by law, or you have given DET permission for the information to be disclosed.

Activity Risks & Insurance
The activity outlined above carries an inherent risk of physical injury occurring. Please note that the Department of Education and Training does not have personal accident insurance cover for students.

If your child is injured as a result of an accident or incident, all costs associated with the injury, including medical costs are the responsibility of the parent/carer. Some incidental medical costs may be covered by Medicare. If you have private health insurance, some costs may be also be covered by your provider. Any other costs must be covered by parents/carers. It is up to all parents/carers to decide what types and what level of private insurance they wish to arrange to cover their child.

Please take this into consideration in deciding whether or not to allow your child to participate in swimming events and travel to and from the venue in school organised transport.

Consent
Please complete the required information and check all appropriate boxes below to indicate your agreement/consent:

☐ I have read all of the information contained in this form in relation to the activity (including any attached material) and I am aware that the Department of Education and Training does not have personal accident insurance cover for students.

☐ I give consent for my child, ________________ (print child's name) in class _______ (print class details), to participate in the activity detailed above.

☐ In the event of an accident or illness, I authorise school staff to obtain or administer any medical assistance or treatment my child may reasonably require.

☐ I accept liability for all costs incurred in obtaining such medical assistance or treatment (including any transportation costs) and undertake to reimburse the State of Queensland (via the Department of Education and Training) the full amount of any costs incurred on my child’s behalf.

Parent/Carer Name: ________________________________ (Please Print)

Parent/Carer's Signature: __________________________ Date: __________/________/________

Please give full details of any problems, either medical or physical, which may affect your child’s full participation in the activity:

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________