

Leonay Public School

"To do your best"



Buring Ave, Leonay 2750
Email: leonay-p.school@det.nsw.edu.au

Ph: 4735 5999, 4735 5851, Fax: 4735 6373 Website: www.leonay-ps.nsw.edu.au

Nominations and payment due to office by Monday 7th February 2022

An electronic version of this note will be sent to your email address as provided by you

13 December 2021

Dear Parents/Caregivers

2022 School Swimming Carnival-Glenbrook Swimming Pool

On **Thursday 10th February 2022** we will be having our Swimming Carnival at **Glenbrook Swimming Complex commencing 7pm sharp.**

All children turning 8 years in 2022 (including Year 2 children who can swim 50 metres) to children turning 13 years are able to compete.

<u>The Carnival will involve only students who have nominated for events.</u> Students are asked to return attached nomination form and payment to the office by Thursday 10th February.

The cost \$4.50 paid to office by Monday 7th February (cash only)

Please note \$2.50 (spectators paid at gate on the night).

Parents/guardians are responsible for the transport and supervision of their child/children at all times during the swimming carnival. Please note no other pools will be available for swimming on the night.

All parents and visitors are required to check in on the Service NSW app. The carnival will run 'rain or shine'.

Please note that the Penrith District Swimming Carnival will be held on Tuesday 1st March at Penrith Pool. If your child is successful, they will be informed ASAP.

Yours sincerely

J Wallace C Payne Coordinator Principal



Leonay Public School

"To do your best"



Buring Ave, Leonay 2750
Email: leonay-p.school@det.nsw.edu.au

Ph: 4735 5999, 4735 5851, Fax: 4735 6373

Website: www.leonay-ps.nsw.edu.au

Permission Note, Payment and Nomination form due Monday 7th February . No late nominations will be accepted.

2022 School Swimming Carnival

swimn		m responsible for the transportation to and the swimming carnival.	
(parent/caregiver)		(date)	
Nomir	nation Form to be returned no later	than Monday 7th February to Mrs Wallace/of	fice.
Child's Name:		DOB:	
Sporti	ng House:	Age (turning in 2022):	Male/Female
Please	tick events you wish to nominate fo	or:	
0	100m Freestyle All Age		
0	50m Freestyle		
0	50m Butterfly		
0	50m Breaststroke		
0	50m Backstroke		
0	200m Open Medley		
11yea	note: RS- turn 8,9,10 years old in 2022 rs- turn in 2022 RS- turn 12 or 13 years old in 2022		
		Medical Information	
Please	list below any medical conditions/a	llergies your child suffers from:	
Please	list any medication (puffer, Epipen	etc) that needs to accompany your child on th	nis activity.
(parent/caregiver)		 (date)	