

YEAR 7 WATER AWARENESS

Monday, 2nd December to Friday, 6th December 2019

Dear Parent/Caregiver

St Ives High School is organising a 5-day compulsory swimming activity program for all Year 7 students with the following outcomes:

- to develop water sense and water confidence
- to encourage water safety practices
- to develop teamwork and social interaction between staff & students
- to improve swimming technique and endurance
- to assist the development of responsible behaviour in a water environment

For sun protection, as outlined by the Department of Education we strongly recommend students apply/reapply sunscreen; wearing a hat is mandatory; a t-shirt or rash vest must be worn during swimming and land activities; no strapless or singlet tops are allowed please; Sunglasses are encouraged for land-based activities.

In keeping with the Cancer Council "Slip, Slop, Slap, Wrap" campaign, St Ives High School has purchased the following sunscreen, **"homebrand Sunscreen Lotion" SPF 50+ Active ingredients: Homosalate 100mg/g, Octyl Salicylate 50mg/g, Octocrylene 80mg/g, Butyl Methoxydibenzoylmethane 40mg/g; Contains: Phenoxyethanol, Benzyl Alcohol Hydroxybenzoates**, (emergency cases only - students may have forgotten, lost or run out of their own sunscreen). Please inform us if your son/daughter has any form of allergy to this brand on the attached form.

School Mobile Number: 0468 419 699

The school will provide buses to and from the venue each day.

Important information

- Students should be dressed using sun safe principles – hat, sun safe clothing, rash vest, t-shirt – no singlet tops
- iPods, PS2 players, mobile phones, are brought at the student's own risk.
- Skateboards, roller blades, sporting equipment e.g balls are not permitted.

First Aid will be provided; however, every student should bring a mini first aid kit in a zip lock bag – (Band-Aids, antiseptic cream, Panadol) and their own sunscreen.

Please bring two towels, a change of clothes each day and a plastic bag. Please label all items of clothing/towels. Students can wear their swimmers to the venue.

Consent Form: Please return this permission slip **with payment/online information (indicating students swimming ability)**, complete with **student's name and roll class**, to the school office. **"Water Awareness" should be placed into the online platform for excursion name.**

Cost: The cost of the week's program will be \$105 and should be returned with the permission slip, **indicating swimming ability (please circle below)** by Friday, 25th October 2019.

I give/do not give permission for my son/daughter/ward _____ of Roll Class _____ to attend St Ives High School Year 7 Water Awareness program on 2nd December – 6th December 2019. I understand that my son/daughter/ward will be swimming in an enclosed natural water environment at Balmoral Beach. I understand that my son/daughter/ward will also be participating in land-based skills and activities.

NB: SPECIAL MEDICAL INFORMATION:

My child has a medical condition or allergies, and/or *is currently taking medication*.

☐ Yes

☐ No

If 'yes' please provide details:

Medical Assistance: I understand that the teacher in charge of the excursion will seek medical assistance for my child should he/she deem this necessary.

EXCURSION CONDITIONS – PLEASE COMPLETE THIS COMPULSORY SECTION:

I understand that my son/daughter/wards attendance at this water venue depends on:

1. Exemplary behaviour whilst at **Year 7 Water Awareness**;
2. The student agrees to use sunscreen, wear a hat and a rash vest for sun protection;
3. **Confirmation of your child's swimming ability by CIRCLING one of the boxes below.**

PLEASE CIRCLE ONE OF THE BOXES BELOW

**NON/WEAK
SWIMMER**

**Less than 100m
unassisted. Wearing of
PFD's compulsory.**

INTERMEDIATE

**Students are able to
swim 100m
competently.**

ADVANCED

**Currently involved
in squad
swimming or
equivalent.**

I give permission for (student name)of Year 7 - (roll call) to participate in the water awareness excursion at Balmoral Baths.

Parent name:

Parent signature:

Parent contact mobile phone:

Emergency Contact name:

Emergency Contact number:

Please return this consent form to the office

Please retain the front information page for your future reference.