

Thomas Acres Public School

Crispsparkle Drive, Ambarvale NSW 2560 Telephone: (02) 4626 4577 Fax: (02) 4626 8488 Email: thomasacre-p.school@det.nsw.edu.au www.thomascre-p.schools.nsw.edu.au

Dear Parent/Carers,

5 February 2024

Excursion/Event	Swimmi	ing Carnival 2024	YEAR/STAGE	Primary			
DATE	Thursday, 2	9 February 2024	Соѕт	\$15 Payment may not be refundable			
VENUE DETAILS	Macquarie Fields Leisure Centre - Fields Rd, Macquarie Fields						
	METHOD	Bus					
TRAVEL ARRANGEMENTS	DEPART	Thomas Acres Public School	DEPART	9:00am			
	RETURN TO	Thomas Acres Public School	RETURN	2:55pm			
MEAL ARRANGEMENTS	Required - please provide lunch, recess and a drink						
UNIFORM DETAILS	Mufti (house colours), swimsuit, hat, closed shoes and sunscreen (A-E HUME, F-L MACARTHUR, M-R ROSE, S-Z RUSE)						
ORGANISER/TELEPHONE	Sports Team – phone 4626 4577						
PAYMENT DUE DATE	19 February 2024						
EDUCATIONAL OUTCOME	To meet the requirements of the PDHPE Syllabus, we ask you to please ensure you fill out the Swimming Requirements page and return to Mr Buckley as soon as possible. THIS IS A WHOLE PRIMARY EVENT – all primary students are encouraged to attend Students in Year 2 who are 8 or turning 8 this year, and are COMPETITIVE SWIMMERS are invited to attend. If your child is successful in making it into the TAPS zone team, please be aware that the Campbelltown Zone Swimming Carnival is held on Monday 4th of March.						

If you wish for your child to attend, please complete the Permission Note and return it to the Office, along with your payment method by the due date. If you are unable to pay by this date, please contact the Office to see if an extension is possible. *Late payments cannot be accepted without prior arrangement*.

Thank You – Mr Buckley

K Permis		PRIMARY – SWI	MMING CARN	IVAL		
hereby give permission for m Swimming Carnival 2024 Excu ravel will be by Bus. My child	rsion/Event or					
Anaphylaxis Asthma (severe or mild)		Allergies	D o	□ Other		
Parent/Carers Signature:			Date://			
PLEASE ENSURE THIS NO				RMISSION	TO ATTEN	
Ĩ	Please select	t one (1) payment	method below			
] <u>ONLINE</u> via Sentral for I	Parents App.	There is no need to retu	ırn this note if you ha	ve given per	mission online.	
EFTPOS - Accepted only by payments not accepted – co			POS terminal located	d in the Offic	ce. Phone	
☐ <u>CASH</u> - enclosed is \$	Adu	It making this payment (please print)			
CREDIT - please use \$	crec	lit for this payment.		Office use		