



# Black Springs Public School

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Principal: Mrs Karolyn Blackburn



## BATHURST SMALL SCHOOLS ATHLETICS CARNIVAL

Monday, 6<sup>th</sup> June 2010

On **Monday, 6<sup>th</sup> June 2010** your child will be participating in the Bathurst Small School's Athletics carnival. The carnival will be held at the Bathurst Sports Ground from **9am-3.30pm**. The carnival is organised as a tabloid of activities, with all students expected to participate fully in as many events as possible. Transport to and from the carnival is the responsibility of parents. All students' names must be marked off the roll when they arrive, and again at the end of the day prior to leaving the venue.

Children 5, 6, and 7 years old will be participating in the infant's carnival. Students turning 8 years in 2010, and up, will be participating in the senior carnival in the following events:-

LONG JUMP

100 METRE RACE

200 METRE RACE

800 METRE RACE

SHOT PUT

DISCUS

RELAY RACES

Each event is supervised and coordinated by a teacher. **Parent helpers are needed** to supervise movement between activities and look after a specific age group. If you are able to assist with this please complete the volunteer form attached.

In the event of inclement weather, an announcement will be made over 2BS and 2LT between 7.00 – 7.30am. If you do not receive 2BS please ring the station direct on 6331-7777 if you are unsure.

A canteen will be available on the day. Please remember to bring hats, sunscreen and plenty of water to drink.

## BATHURST SMALL SCHOOLS ATHLETICS CARNIVAL - PERMISSION NOTE

I give permission for my child/children \_\_\_\_\_ to participate in the Small Schools' Athletics Carnival at the Bathurst Sports Ground on **Monday, 6<sup>th</sup> June** commencing at 9.00am.

I understand that transport will be by private car and that I must have my child's name marked off the roll on arrival and again at the end of the day before leaving the venue.

You need to be aware of my child/children's following medical condition or reason for not competing in a particular activity: \_\_\_\_\_

Signed: \_\_\_\_\_

Dated: \_\_\_\_\_

I, (name) \_\_\_\_\_ am able to volunteer on the day to look after (please tick):

5 Year Old Girls _____	6 Year Old Girls _____	7 Year Old Girls _____	8 Year Old Girls _____
9 Year Old Girls _____	10 Year Old Girls _____	11 Year Old Girls _____	12/13 Yr Old Girls _____
5 Year Old Boys _____	6 Year Old Boys _____	7 Year Old Boys _____	8 Year Old Boys _____
9 Year Old Boys _____	10 Year Old Boys _____	11 Year Old Boys _____	12/13 Yr Old Boys _____

If you are able to volunteer, please collect your folder from Mrs Forsyth at the beginning of the day. Thank you.