

**Swim School (11/11/2024 to 22/11/2024)**

The NSW Department of Education School Swimming Scheme is an intensive learn to swim program, which develops water confidence and provides students with basic skills in water safety and survival. The Scheme is conducted over ten days at the Katoomba Sports and Aquatic Centre. Each daily lesson is 45 minutes. The program is open to all students from Year 2 to Year 6.

Date/Time	Session Name	Venue
Monday, 11 November 2024(12:15 PM to 2:55 PM)	Swim School	Katoomba Sports and Aquatic Centre
Tuesday, 12 November 2024(12:15 PM to 2:55 PM)	Swim School	Katoomba Sports and Aquatic Centre
Wednesday, 13 November 2024(12:15 PM to 2:55 PM)	Swim School	Katoomba Sports and Aquatic Centre
Thursday, 14 November 2024(12:15 PM to 2:55 PM)	Swim School	Katoomba Sports and Aquatic Centre
Friday, 15 November 2024(12:15 PM to 2:55 PM)	Swim School	Katoomba Sports and Aquatic Centre
Monday, 18 November 2024(12:15 PM to 2:55 PM)	Swim School	Katoomba Sports and Aquatic Centre
Tuesday, 19 November 2024(12:15 PM to 2:55 PM)	Swim School	Katoomba Sports and Aquatic Centre
Wednesday, 20 November 2024(12:15 PM to 2:55 PM)	Swim School	Katoomba Sports and Aquatic Centre
Thursday, 21 November 2024(12:15 PM to 2:55 PM)	Swim School	Katoomba Sports and Aquatic Centre
Friday, 22 November 2024(12:15 PM to 2:55 PM)	Swim School	Katoomba Sports and Aquatic Centre

Dress Code: Full School Uniform with swimmers underneath each day of the program.

Transport: Bus

Staff member in charge: Rhiannon HARRIS

Cost: \$137.00, due by Monday, 4 November 2024

Paid: \$0.00

Consent: Required, due by Monday, 4 November 2024

Consent/Payment can be provided online through your school's parent portal (<https://blackheath-p-nsw.compass.education>), or alternatively by returning the form below to the School Office.

The cost for this incursion is \$137 per student. This includes pool entry for ten days and transport by bus each day to and from the pool. The cost of the lessons are covered by the Department of Education. There are 60 places available in the program. Places are given on a first in best dressed basis. You will not be able to process payment if the places are filled.

Should you wish your child to attend but are experiencing financial difficulty, assistance may be available through the Student Assistance Funds. Please contact Mrs Hardge if you need to discuss this.

Students are to bring a towel, goggles, hat, sunscreen, water bottle, extra food/snacks, and warm clothes. It is recommended that swimming items are brought in a separate small bag.

If you would like to order lunch from the canteen over this two week period you will need to have your lunch order at recess. You will need to clearly state on your order you are at swim school. You will not be able to order any of the lunch specials, only from the regular menu.

Please complete the Medical Details or Emergency Contact Numbers section only if they differ from details already held by the school in Compass.

Blackheath Public School

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Consent/Payment Form for Compass Support (JDLF)



- I give permission for my child Compass Support to attend the school event listed above.
- I understand that this is an official school event and that Compass Support will adhere to the dress code, as outlined above, and behave in alignment with the school's code of conduct.
- I acknowledge that this event/activity is required to be held in accordance with any current NSW Health COVID-19 Public Health Orders and the NSW Department of Education's policies and procedures. I acknowledge and accept that there is a risk that my child may be exposed to COVID-19 whilst attending and participating at this event. I confirm that my child will not attend if displaying any symptoms of illness, and/or if directed to isolate under public health orders.

Details of allergies and/or medication currently being taken:

[Empty rectangular box for allergies and/or medication]

Concussion Clearance

The Australian Medical Association recommends students being symptom free of concussion for 21 days before returning to sport.

- If your child/ward sustains a concussion, or experiences any concussion symptoms, in the 21 days period prior to the event commencing, you must report this to team officials, and a medical clearance is required in order for your child/ward to participate in the event.
- Medical clearances can be attached to this consent form or can be submitted to team officials separately.

Important information

In the event of injury, no personal injury insurance cover is provided by the NSW Department of Education for students in relation to school sporting activities, physical education lessons or any other school activity. The Department's public liability cover is fault-based and limited to breaches by the Department of its duty of care to students that may result in claims for compensation.

Parents/Carers are advised to assess the level and extent of their child/ward's involvement in the sport program offered by the school, school sport zone, region and state school sport Associations when deciding whether additional insurance cover is required prior to their child/ward's involvement in the program. Personal accident insurance cover is available through normal retail outlets.

Parents/Carers who have private ambulance cover need to check whether that cover extends to interstate travel and make additional arrangements, as considered appropriate.

The NSW Supplementary Sporting Injury Benefits Scheme, funded by the NSW Government, provides limited cover for serious injury resulting in the permanent loss of a prescribed faculty or the loss of use of certain prescribed parts of the body. The Supplementary Scheme does not cover medical costs or dental costs. Further information can be obtained from <https://www.icare.nsw.gov.au/injured-or-ill-people/sporting-injuries/payments/#gref>. Further information regarding student accident insurance and private health cover is provided at: <https://app.education.nsw.gov.au/sport/file/1449>.

Emergency Phone Numbers:

Parent A Phone Number _____ Parent B Phone Number _____ Guardian Phone Number _____

Parent/guardian signature (consent/agreement): _____ Date: ____/____/____

