

March, 2017

## HOUSE CROSS COUNTRY 2017

Dear Parents of Students in Years 3, 4, 5 & 6,

As part of our school fitness program, House Cross Country will be held on **\*Friday 28 April 2017** at **Highfield Park** commencing at **11:40am** and finishing at approximately **2:30pm**. Students will walk down to Highfield Park at 11:10am, with the first event beginning at 11:40am (8 & 9 year olds).

Students are encouraged to train for this event outside of school hours. Running club will be available on Wednesday mornings from 8:00am for students to assist with this. The school holidays would be a great time to include some extra training.

It is advisable for children to participate in shorts or leggings and T-shirt and have warm clothing to wear after their event in case of inclement weather. Students should wear a t-shirt in the colour of their house. We recommend students apply sunscreen in the morning and bring it to re-apply throughout the event in case of a sunny day or high UV ratings.

We suggest students eat a substantial **breakfast** and students will need to bring a snack to eat **after** their event and a bottle of water.

**Asthma medication should be carried with the individual student for the duration of the event and asthma identifying bracelets are to be worn by students who suffer from asthma, to make them easily recognisable. Please also ensure that preventative medication is taken prior to event.**

Other medications such as epipens for anaphalaxis, will be collected from first aid by classrooms teachers and managed by the first aid officer on duty for the event.

Asthma bracelets must be returned at the conclusion of the event to classroom teachers.

- ❖ 8 & 9 year old students (students who turn 8 or 9 during 2017) will participate in a 1km event – one circuit of Highfield Park.
- ❖ 10 year old students (students who turn 10 during 2017) will participate in a 2km event – two circuits of Highfield Park
- ❖ 11 & 12/13 year old students (students who turn 11, 12 or 13 during 2017) will participate in a 3km event – three circuits of Highfield Park.

When not competing, students are expected to remain with their house group at all times during the event. Toilets will be supervised by teachers. After the event, students will walk back to school in their class groups for the afternoon.

The order of events on the day will be as above. Parents are more than welcome to come along and support us. If you are intending to bring a cheer squad, please leave pets at home as we have allergies in the school that we need to consider.

\*Please note: Should we encounter severe weather conditions the event will be postponed and a new date announced.

Yours sincerely,

Nicole Snelleksz  
Sports Coordinator

**Canterbury Primary School  
Parent Consent Form  
House Cross Country 2017 (Grade 3-6)**



I consent to my child attending an excursion to Highfield Park as per the details outlined in the accompanying letter.

I authorise the teacher in charge of the excursion to consent, where it is impractical to communicate with me, to my child receiving medical or surgical treatment as deemed necessary and agree to meet any medical or hospital expenses incurred.

Please duplicate information below as one set is taken on the excursion and one set remains at the school for emergency purposes on the day.

**STUDENT DETAILS:**

Student's Name: ..... Class: .....

Parent Name: .....

Address: .....

Telephone: Home: ..... Work:..... Mobile: .....

Medical action plan in place for student: YES NO Details: ie: Asthma, allergies etc

**EMERGENCY CONTACT PERSON:**

Name:.....

(Must be contactable on the following numbers for the duration of the excursion.)

Telephone: Home: ..... Work:..... Mobile: .....

Parent/Guardian Signature: ..... Date: .....

**PERMISSION SLIP INFORMATION - TO REMAIN AT SCHOOL OFFICE  
House Cross Country 2017**

**STUDENT DETAILS:**

Student's Name: ..... Class: .....

Parent Name: .....

Address: .....

Telephone: Home: ..... Work:..... Mobile: .....

Medical action plan in place for student: YES NO Details: ie: Asthma, allergies etc

**EMERGENCY CONTACT PERSON:**

Name:.....

(Must be contactable on the following numbers for the duration of the excursion.)

Telephone: Home: ..... Work:..... Mobile: .....

Parent/Guardian Signature: ..... Date: .....

Please complete both sections of the form and return it to your class teacher **before Friday 21<sup>st</sup> April**. Forms not received by the due date will result in students not attending the excursion.