

March 2017



Dear Parents,

Canterbury Primary School Running Club 2017

Running Club will be kicking off in week 6. This is an internal optional program offered to students in Year 3 – 6 at no cost. Running Club promotes lifelong physical literacy and wellbeing through keeping active in a fun, encouraging environment, while inspiring them to achieve their own personal goals and feeling of accomplishment. It is a great way to maintain cardio fitness and is perfect preparation for upcoming cross-country events.

When: **Wednesday mornings**

Time: **8am – 8:40am**

Commencing **Wednesday 8th March.**

Where: **ANZAC Green at 8am.**

Students will need to arrive promptly to have adequate time to warm up and stretch.

Your child's expression of interest does not require them to attend every session. They may choose the sessions they wish to attend.

PLEASE NOTE: Running club will not run in wet weather

Students will need to bring:

- ✓ Water bottle
- ✓ Fruit or a snack to have after training
- ✓ Appropriate running shoes and clothes
- ✓ Lots of enthusiasm and energy!

We look forward to working with your child and helping them to achieve their personal goals.

Please fill out and return the attached consent form to the office if you are happy for your child to participate in Running Club this year. Consent forms must be received prior to your child attending. Please direct any queries to Ms Snelleksz snelleksz.nicole.t@edumail.vic.gov.au

Kind Regards,

Running Club Team.

**Canterbury Primary School
Parent Consent Form
Running Club 2017**



I consent to my child attending Running Club as per the details outlined in the accompanying letter.

I authorise the teacher in charge of the session 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 kept with the teacher in charge 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 alert in place for this student: YES NO (eg. Asthma, heart condition, anaphylaxis 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
Running Club 2017**

STUDENT DETAILS:

Student's Name: Class:

Parent Name:

Address:

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

Medical alert in place for this student: YES NO (eg. Asthma, heart condition, anaphylaxis 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 the office prior to commencing Running Club.