CASINO CHRISTIAN SCHOOL

Honour Christ, build community and 'grow in grace and knowledge'
2 Peter 3:18

Phone 02 6662 5599
Email admin@ccs.nsw.edu.au
Web www.ccs.nsw.edu.au
PO Box 30 Casino NSW 2470
93 Manifold Road North Casino
Office Hours
Mon - Fri 8.00am - 4.00pm
ABN 93 392 520 152

Wednesday 25 March, 2026

Water Games & Inflatable Excursion
Friday 24th April, 2026

Dear Parents/Guardians,

On **Friday 24th April 2026**, the senior SLR class and the PASS elective class will be travelling to **Lismore Memorial Baths**. An important component of these subjects is promoting learning through movement by experiencing physical activities that are not usually done in school sport or PE. The PASS class have been completing a unit on "Physical Activity and Health" and the SLR class has been completing a unit on "Aquatics and Healthy Lifestyle". This excursion directly relates to key components of each unit. The aim of this excursion is to play water games using a giant inflatable and the medium-sized pool at the Lismore Memorial baths.

Excursion Details

- **9:15 AM** – Depart by bus from Casino Christian School
- **9:45 AM** – Arrive at Lismore Memorial Pool and get ready.
- **10:15 AM** – pool Games (Inflatable, Underwater Hockey, other pool games)
- **12:45 PM** – Get changed
- **1:00 PM** – Lunch in Lismore City Centre
- **2:15 PM** – Return to school
- **2:15 PM** – Arrive back at school.

Cost: $25 (includes pool entry, bus hire, 25m pool hire & Inflatable use with life guard).

What to bring

- Wear full school uniform or sports uniform to the excursion.
- Plastic water bottle
- Food and/or money for lunch
- Swim wear (must wear a rashshirt and no bikinis)
- Swimming goggles
- Towel & deoderant
- Change back into full school uniform or sports uniform for the trip back to school
- Enclosed shoes for the bus (no crocs, thongs or slides for the bus trip
- Asthma puffer and any required medication
- Contact lenses if preferred (for students who wear glasses)
- Hat and Suncreen (if you do not like the school sunscreen)
- ***It is essential that each student brings swimming goggles***

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Important Information

- **Date:** Friday, 24th April 2026
- **Departure:** 9:15 AM from Casino Christian School
  - **Students can meet us at the pool by 9.45am**
- **Return:** 2.45pm at Casino Christian School.
  - **Students can go home after lunch.**
- **Location:** Lismore Memorial Baths & Lismore City Centre.
- **Cost:** **$25 per student**
- If your child does **not** travel on the bus and arranges their own transport, they will still be required to pay the full excursion fee.
- **What to wear:** See above

Please Note:

Electronic devices (e.g. mobile phones) are **not to be used on the bus** and must remain switched off in bags unless needed for an emergency.

To Participate

Please complete and return the following:

1. **Permission note** (below)
2. **$25 payment**
3. All forms and payment are due by **Thursday 2nd April 2026**.

D. McPherson
PASS & SLR Teacher

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I give permission for my child _____ to participate in the Water Games & Inflatable excursion on Friday 24th April 2026. Should any medical or hospital treatment be required for my child, I authorise the teacher in charge to take the appropriate action and any associated costs will be met by me.

Special needs (e.g. medication and allergies) for the teachers to be aware of:

_____

_____

_____

Signed: _____ (Parent/Guardian)

Print Name: _____ Date: _____

To Lismore Memorial Baths (Morning Travel)

☐ My child will travel on the bus from Casino Christian School.

☐ My child will meet at Lismore Memorial Baths

From Wet'N'Wild (Evening Travel)

☐ My child will stay in Lismore at the end of the excursion.

☐ My child will travel on the bus to Casino Christian School at the end of the day.

Please complete the Permission note and return it to school with your payment of $85.

PLEASE TURN THIS SHEET OVER TO SEE THE METHOD OF PAYMENT OPTIONS.

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METHOD OF PAYMENT OPTIONS: WATER GAMES & INFLATABLE EXCURSION (LISMORE)

STUDENT NAME: _____

COST: $25 per student (please pay by Thursday 2nd April, 2026 – this includes all Netbank payments).

METHOD OF PAYMENT: ☐ Cash ☐ Cheque ☐ Eftpos ☐ Netbank ☐ Credit Card

DATE OF PAYMENT: _____ [THE DATE THE EXCURSION WILL BE PAID]

Online Payment (Netbank):

Bank: National Australia Bank
BSB No: 082 506
Account Name: Casino Christian School
Account number: 828017136

Please ensure that the reference has your **FAMILY CODE** & the **NAME** of the excursion.

Credit Card Payment:

Please Debit my (please circle): Visa Card MasterCard

Expiry Date: _____ / _____ CVV: ___ ___ ___ For the amount of: _____

Cardholder's Name: _____ Signature: _____

D. McPherson
PASS & SLR Teacher