



Thursday 20 June 2024

## ZONE ATHLETICS AT COFFS HARBOUR

Wednesday 7 August 2024

Dear Parents/Carers,

- What:** Coffs Harbour Christian School is hosting the zone athletics carnival at Coffs CEX International Stadium on Wednesday 7<sup>th</sup> August 2024. We will be aiming to send 45-50 students to participate in this event with supervising teachers and parents from our school.
- When:** Depart from Casino Presbyterian Church at 6.00am on Wednesday 7<sup>th</sup> August 2024 and arrive at CEX International Stadium in Coffs Harbour by 8.30am.
- \*\*\*please arrive at the church 5 to 10 minutes before the departure time\*\*\*
- Return journey should depart from Coffs CEX International Stadium in Coffs Harbour by 3.30pm and return to Casino Presbyterian Church by 6.00pm on Wednesday 7<sup>th</sup> August 2024.
- \*\*\*please arrive at the church before the arrival time to pick up your children\*\*\*
- Cost:** The cost for **students is \$55** for bus & carnival fee. The cost for **adults is \$40** for bus. If your child does not get on the bus and instead travels to Coffs Harbour by car, they will still have to pay the full amount for this excursion. However, if we get enough students to cover the bus costs then we can reduce the cost for the students travelling by car.
- What to wear:** Students must wear sports uniform on the day. Students must compete in sports uniform or clothes which are modest (one piece or two-piece running suits, like swimming costume design, **are not permitted**). Spikes are permitted for the 100m, 200m & 400m only.
- What to bring:** Hat, sunscreen, large water bottle & Asthma puffer (if required). Food for morning tea, lunch, and afternoon tea. A canteen is available, but you still need to bring food just in case.

**ANY QUESTIONS:** Please don't hesitate to contact me at school on 6662 5599.

**EVENT QUALIFICATION:** Please see the attached list.

*Please read the above details carefully and if your child is able to represent the school at zone athletics could you please fill out the attached **permission slip** and return it with the **money by Tuesday 25<sup>th</sup> June 2024** (Term 2 / Week 9) **by 3pm**.*

D. McPherson  
Sports Coordinator



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## ZONE ATHLETICS AT COFFS HARBOUR

Wednesday 7 August 2024

### Selection details

**SCHOOL:** Primary / Secondary

**AGE:** U8 / U9 / U10 / U11 / U12 / U13 / U14 / U15 / U16 / U17 / U18

### YOU HAVE BEEN SELECTED FOR THE FOLLOWING EVENTS:

- 100m
- 200m
- 400m
- 800m
- 1500m
- High Jump
- Long Jump
- Discus
- Shot Put
- Javelin



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## **ZONE ATHLETICS AT COFFS HARBOUR**

**Wednesday 7 August 2024**

I give permission for my child/children \_\_\_\_\_ to attend the Zone Athletics Carnival at the Coffs CEX International Stadium in Coffs Harbour on Wednesday 7<sup>th</sup> August 2024.

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: -

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Does your child suffer from Asthma?      Please circle: Yes / No

Please list all medications taken both regularly and during an attack. Please list any triggers and any other information that may assist staff on the day.

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Signed: \_\_\_\_\_ (Parent/Carer)

Print Name: \_\_\_\_\_

Date: \_\_\_\_\_



## **CHILD TRAVEL ARRANGEMENTS**

I understand they will travel down by bus on Wednesday 7<sup>th</sup> August 2024 at 6.00am and return by bus to Casino Presbyterian Church at approximately 6.00 pm that same day.

**Please tick the options that apply to your child:**

- My child will travel on the bus from Casino Presbyterian Church to Coffs Harbour  
 My child will travel by car to Coffs Harbour.

**AND**

- My child will travel on the bus to Casino Presbyterian Church from Coffs Harbour.  
 My child will travel by car from Coffs Harbour.

## **CARER / PARENT TRAVEL ARRANGEMENTS**

We understand that this is an event that parents / carers enjoy attending. If there is space on the bus, we are happy for the adults to travel to the carnival on the bus as well.

**Please tick your travel arrangements**

- I will drive to the zone athletics carnival in Coffs Harnour  
 If there is space, I would like to travel on the bus.

Adults wanting to travel on bus:

1. \_\_\_\_\_ Mobile: \_\_\_\_\_

2. \_\_\_\_\_ Mobile: \_\_\_\_\_

Signed: \_\_\_\_\_ (Parent/Carer)

Print Name: \_\_\_\_\_

Date: \_\_\_\_\_

D. McPherson  
Sports Coordinator

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





## METHOD OF PAYMENT OPTIONS: ZONE ATHLETICS (COFFS HARBOUR)

**STUDENT NAME/S:** \_\_\_\_\_

**PARENT / CARER NAME/S:** \_\_\_\_\_

**COST:** \$55 per student & \$40 per adult (please pay by Tuesday 25<sup>th</sup> June 2024).

**TOTAL COST:** \_\_\_\_\_

**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

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Expiry Date: \_\_\_\_ / \_\_\_\_            CVV: \_\_\_\_ \_\_\_\_ \_\_\_\_            For the amount of: \_\_\_\_\_

Cardholder's Name: \_\_\_\_\_            Signature: \_\_\_\_\_

D. McPherson  
Sports Coordinator