

Excellence, innovation and success in a caring environment.

# Alfords Point Public School

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## CROSS COUNTRY CARNIVAL

Friday 3 April 2020

Venue – Coachwood Oval

Dear Parents/Carers

This year the school Cross Country Carnival will be held at Coachwood Oval. We are following the same successful program as last year. **ALL** students K-6 need to be at school at 8.40am for 8.45 am roll call before we walk down in our classes to Coachwood Oval for an anticipated 9.00am start. This year the K-2 events will be run concurrently with the 8,9,10,11,12 and 13 year old events. Students will need to take a lightweight bag or their excursion bag to Coachwood Oval. This should contain some sort of ground cover (perhaps a towel) a drink and their recess.

All students will be participating unless an illness or injury excludes them (a note is required in this case).

Competitors will be arranged in designated House areas at the start/finish line with parents also allocated a prime viewing position (bring a chair). Sports uniform, including a hat, house T-Shirt and running shoes should be worn.

**House Colours**  
**Kookaburras – Blue**  
**Rosellas – Red**  
**Cockatoos – Yellow**  
**Lorikeets – Green**

Tracksuits may be worn prior to the race but definitely no hats or tracksuits to be worn during the races.

**Medication** – Asthmatics, mild or chronic, must carry their medicine with them. There is a note attached concerning notification.

### Events

Age	Distance
Infants 5-8 years	400 m to 800 m
Primary Jnr 8-10 Years	2 km race
Primary Snr 11-13 years	3 km race

Students compete in events according to the age they will be turning this year e.g. if a child is now 7 years old but turning 8 years old in December then they must compete as an 8 year old.

Students in Year 2, who compete as an 8 year old, will have to make a choice as to which 8 year old event they wish to compete in. If they want an opportunity to progress to zone level they **must** compete in the primary section **only** of the carnival. All students including 8 years olds can **only** compete in one race.

Students coming 1<sup>st</sup> to 8<sup>th</sup> in Primary events **may qualify** to go to the Zone Carnival (9<sup>th</sup> & 10<sup>th</sup> places might be reserves). A note will be sent home if a student qualifies. The Engadine Zone Carnival is Friday 22 May, there will be NO PSSA sport on that day.

### Request

Parents/Carers are invited to assist as course officials for both Infants and Primary events. Please return Infants helper notes to Mrs Dobson and Primary helper notes to Mrs Burke by Wednesday 25 March via the drop box located in the front office. Please ensure the school has a completed WWCC declaration for volunteers and non child related contractors. Officials please see Mrs Dobson (Infants) and Mrs Burke (Primary) on day of carnival at Coachwood Oval.

If it rains on the day the Cross Country Carnival will be held on a **future date yet to be decided**.

**Debbie Burke & Kim Dobson**  
**Cross Country Organisers**

**Annette Wein**  
**Principal**

**ALFORDS POINT PUBLIC SCHOOL**

**CROSS COUNTRY CARNIVAL 2020**

My child \_\_\_\_\_ of class \_\_\_\_\_ has permission to attend the School Cross Country Carnival on Friday 3 April at Coachwood Oval, on school property and (primary only) pathways on boundaries around the school property. If wet weather conditions prevail on Friday 3 April I understand an alternative date will be organised for which my child has permission to attend.

I also hereby give permission for my child to walk to Coachwood Oval on other occasions throughout 2020 to participate in school activities.

Signed \_\_\_\_\_ Date \_\_\_\_\_

**Medical Note – Asthma**

My child \_\_\_\_\_ of Class \_\_\_\_\_ suffers from asthma and will carry medication during the Cross Country race on Friday 3 April 2020.

Medication \_\_\_\_\_

Signed \_\_\_\_\_ Date \_\_\_\_\_

✂.....

I would like to assist at the Cross Country Carnival on Friday 3 April 2020 from 9.00am.  
I have completed and provided to the school a WWCC declaration for volunteers and non child related contractors.

Infants

Primary

Parent's Name \_\_\_\_\_ Child's Name & Class \_\_\_\_\_

Contact Number \_\_\_\_\_