# ST. JOSEPH'S THE STATE OF THE

# ST JOSEPH'S CATHOLIC HIGH SCHOOL

16 Macquarie St, Albion Park NSW 2527 PO Box 130, Albion Park NSW 2527 Tel: (02) 4230 8500

Fax: (02) 4256 5793 Email: info@sjchsdow.catholic.edu.au

25 July 2017

Dear Parent/Guardian,

### Nowra Waterdragons Community Dragon Boat Regatta 2017

Your child has indicated that they would like to represent St Joseph's Catholic High School in the Nowra Waterdragons Community Dragon Boat Regatta. This event will see local schools and community teams compete in a fun 200m event on Sunday 17 September 2017 at Grey's Beach, Shoalhaven River, Nowra.

Prior to the event, all participants are required to attend 3 training sessions. These will be on Friday the 25 August, 8<sup>th</sup> September and 15<sup>th</sup> September at the Illawarra Rowing Centre, Northcliffe Dr, Warrawong. Students will need to commit to both the training and race days.

Training Venue: Illawarra Rowing Centre, Northcliffe Dr, Warrawong

**Dates:** 25 August, 8 September, 15 September

Time: 4.15pm to approx. 5.30pm

Race day venue: Grey's Beach, Shoalhaven River, Nowra

Date: Sunday 17<sup>th</sup> September
Time: 8.30 am to 4.30pm approx.

Cost: \$15.00 each student (includes training x 3 and race)

Payment: Online Payment is our preferred payment method for this activity. Go to the school website <a href="www.sjchsdow.catholic.edu.au">www.sjchsdow.catholic.edu.au</a> Homepage, Excursion Letters and Payments and select the relevant link. This link closes at Midnight on the final payment date. Alternatively, Payment can be made at the front office via Cheque/Cash or Eftpos.

Transport: Students to find their own way to both training and race day venues. Car-

pooling is also an option. Please indicate if your son/daughter requires a lift.

**Clothing:** Full school sports uniform.

<u>Please Note</u>: If students are going to be travelling to and from the venue with their parents, or the parents of another student, you will need to notify the school before the day. Students will not be permitted to leave the venue unless they are with their parents. Please indicate any alternate traveling arrangements on the return permission slip.

Parents are most cordially invited to cheer and spectate. Please indicate if you would like to join our staff/parent boat to participate in the event

There are only limited positions on the boat. First in with their note and payment will secure a spot.

### Final payment is Friday 12 August 2017; no notes or payments will be accepted after this date.

If you have any questions regarding this excursion, please do not hesitate to contact the School on 4230 8500.

Sincerely

Mrs J Linsley Dragon Boat Organiser

## Nowra Waterdragon's Community Dragon Boat Regatta 2017

To be returned by Friday 12<sup>th</sup> August 2017

Please note the Excursion Policy now states that the permission note and money must be returned by the due date or your child will not be able to participate.

Feachers:       Mr Z Ellul & Mrs J Linsley         Event:       Nowra Waterdragon's Community Dragon Boat Regatta
<u>Fraining Dates:</u> Friday 25 <sup>th</sup> August, 8 <sup>th</sup> September & 15 <sup>th</sup> September 2017  Sunday 17 <sup>th</sup> September 2017
give permission for my child of Homeroom o participate in the Nowra Waterdragon's Community Dragon Boat Regatta at Grey's Beach, Shoalhaven River, Nowra. understand that my child also needs to attend team training on Friday 25 <sup>th</sup> August, 8 <sup>th</sup> September and 15 <sup>th</sup> September at Illawarra Rowing Centre, Northcliffe Dr, Warrawong.
Γhe cost of this event is \$15.00.
Payment method used:
□ Payment enclosed \$ □ Online payment made: Receipt No:
understand that students will be travelling to and from the venue by private transport and that they will need to be dropped off and picked up at the venue by parents. Please indicate below how your child will be travelling to training and race day:
My child will be travelling to the training venue with:
Name:
Daytime Contact Number:
My child will be travelling home from the training venue with:
Name:
Daytime Contact Number:
My child will be travelling to the race day venue with:
Name:
Daytime Contact Number:
My child will be travelling home from the race day venue with:
Name:
Daytime Contact Number:
Please indicate if you would be interested in joining the staff/parents dragon boat. You will also be required to attend team training.

Parent Name:

My child suffers from the following medical conditions:	
My child has experienced / has a history of the following injuries:	
wy child has experienced / has a history of the following injuries.	
Parent/Guardian Name (please print):	
Parent Signature:	
Contact Number:	
Date:	