

Permission Note for Athletics Carnival 2026

Dear Parent/Carer

The Melrose High School Athletics Carnival will be held in Week 6, Term 1. The focus of the day will be on participation in the Athletics events and House competitions. Students will not be permitted to leave the venue during the day. We encourage all students to come along in their House colours for a fun day at the track.

- WHEN:** Monday, 2 March 2026 (Week 6, Term 1)
- TIME:** 9:00am – 3:00pm
- WHERE:** Woden Athletic Park, Ainsworth Street, Phillip
- TRAVEL:** Students are to arrange their own transport to and from the event
- STAFF:** All staff
- COST:** Nil

Additional Information:

The Athletics Carnival is a whole school event, and all students are expected to attend. **There will be no alternative program available at school.** Students are required to supply their own recess, lunch, and water for the day. There will be a canteen available as a fundraiser for the Year 10 Formal (**cash only**). We strongly advise students bring adequate sun protection including sunscreen, and appropriate clothing for all weather conditions.

A full risk assessment is available at the Front Office upon request.

Staff accompanying students on excursions will take all reasonable care while the students are in their charge to protect them from injury and to control and supervise their behaviour and activities.

Parents should be aware that staff members are not responsible for injuries or damage to property which may occur on an excursion where, in all circumstances, staff have not been negligent. Parents should warn children of the risk to themselves, to others and to property, of impulsive, wilful or disobedient behaviour.

Please complete the permission note (and medical form if you have not yet completed one for this year) for your child to participate in this event and return to the Front Office or email to MelroseHS.Events@ed.act.edu.au. Completed forms **due by Monday, 23 February 2026**.

Yours sincerely

Susan Peachey
PE & Health Executive
February 2026

Permission Note for Athletics Carnival 2026

I give permission for my child _____ Year level _____ to attend the **Athletics Carnival 2026** on Monday, 2 March 2026.

I agree to my child participating in the activities associated with this excursion mentioned previously. I have discussed with my child the need for expected behaviour on this excursion. I authorise the school to make arrangements for the welfare of my child (including medical or surgical treatment) in an emergency and I agree to meet the associated costs. I have provided to the school all medical information relevant to my child attending this excursion.

I agree that my child will be under the authority of the school for the duration of the excursion and that the school is authorised to return my child to school or home at my expense if the school considers that circumstances warrant such action. I give permission for my child to travel by private car, driven by a staff member or parent, in an emergency.

Please tick one of the below options. A 2026 Medical and Consent forms MUST be returned to the front office otherwise students will be unable to attend on the day. This form needs to be completed annually. New forms also need to be submitted if there are changes.

Medical form returned in 2026

Please find attached updated medical form

***If a Student's medical condition has changed a new Medical Consent form must be completed. The form can be downloaded from the School Website - Excursion Tab - <http://www.melrosehs.act.edu.au> or contact the front office on 02 6142 0700 for further assistance.*

- Students participating in this event are required to demonstrate appropriate behaviours that are in alignment with Melrose PBL values and school / program codes of conduct. Students whose behaviour does not align with these may be removed from the excursion list. Please note this is inclusive of behaviours at school in the days/weeks prior to the event running.**
- I understand students need to make their own way to and from this event**
- I understand students will be dismissed from the venue at 3pm**
- I understand this is a whole school event and there will be no alternative program at the school**

Will your child require medication to be administered during the Physical Activity/Activities (e.g. allergy medication, pain relief)?

Yes No

If yes, please complete a *Medication Authorisation and Administration Record* (available through the front office).

Is there any additional information you need to provide to support your child's participation in this Physical Activity/Activities?

Yes No

If yes, please provide these details

Please provide the following information:

Medicare No:		Private Health Fund:		Membership No	
Ambulance Fund: Parents are responsible for ambulance costs outside the ACT.					

Parent contact if needed during the event:

Parent/Carer Name: _____ Phone: _____

Parent/Carer Signature: _____ Date: ___ / ___ / ___