

8<sup>th</sup> November 2021



204 Selwyn Street  
Christchurch 8024  
Ph (03) 332 2408

Dear Parents/ Caregivers

### Inter-School Duathlon

We are pleased to advise that the Inter School Duathlon to be held at Ruapuna Raceway (Mike Pero Motorsport Park) is scheduled to go ahead on Monday, 8<sup>th</sup> November. Your child has put their name forward to represent the school.

All entrants must complete as an individual, there is no team event.

- Year 7 and 8 - 2km run, 9km bike, and 1km run.

Due to the current covid level, the schedule for the day is completely different from past years. Schools will compete in appointed time slots. Christchurch South Karamata Intermediate have been given a 1.45pm time slot.

We have been advised that only one person (the team manager who is the teacher in charge) is to enter the course with the students so unfortunately there are to be no spectators on the course.

For this event to take place, we will need help to transport the competitors and their bikes to Ruapuna Raceway. If you are able to help with transport please indicate on the form below and return it to the school office.

We will need to leave school at **1.00pm** and return at approximately **4.00pm**. Parents providing transport will need to be at school by **12.45pm** to load cycles.

Please return the form below to the office by **Thursday, 4<sup>th</sup> November** so that we know we have sufficient transport to take the team. Please let us know immediately if your child will not be competing.

We understand it will be quite a different experience for our students, but we still hope they will have a great time and enjoy participate in the race.

Yours sincerely

Ian Harrison  
Teacher in Charge

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#### **Inter-School Duathlon 8<sup>th</sup> November 2022 – Ruapuna Raceway – Permission and Parent Help**

- I give permission for \_\_\_\_\_ Room \_\_\_\_\_ to compete in the Inter-School Duathlon travelling by private vehicle.
- I am able to transport \_\_\_\_\_ competitors to and from the event
- I am able to transport \_\_\_\_\_ cycles (by bike rack or trailer) to and from the event

Name of parent /caregiver \_\_\_\_\_

Cell Phone # \_\_\_\_\_

Signed \_\_\_\_\_

**Please return to the office by Thursday, 4<sup>th</sup> November**