



Sacred Heart Central School

Faith & Knowledge

Event	ICPSC Rugby League Semi Final
Date of Event	9th August 2017
Fees payable	\$25 nomination
Venue	Cabramatta Leagues Club
Venue Address	24 Sussex St, Cabramatta
Time of departure	Private
Time events commence	9:00am
Time students are expected at the venue	8:30am
Students to meet	At the football ground at Cabramatta
Transport	Private Car
Uniform	Full sports uniform
School to provide	Playing Uniform, sunscreen, first aid kit
Students to bring	Water bottles, hat, own foot wear, headgear, mouthguard
Canteen available	Yes
Teachers attending	Ms Lisa Buchanan
Special instructions	Training will take place after school on Wednesday 2 nd August 3-30 – 4.30pm at school and during sport on Thursday 3 rd August. Students will need to bring their foot wear, headgear, mouthguard. Students will need to be picked up by an adult after training on Wednesday.
Expected event finish time	3:00pm
Return to school	Next day

Permission slip and money to be paid to the front office by *Friday 4th August*
Failure to return by the due date may mean that students cannot attend the event.

Ms Lisa Buchanan
Stage Three Teacher

Mrs Janet Cartwright
Principal

PLEASE RETURN THIS PAGE with any required money to the Front Office in a blue payment envelope by 4th August 2017

CONSENT FORM

As a parent/guardian of _____ Class _____, I give my consent for him/her to participate in the **Independent and Catholic Primary Schools Challenge Rugby League Semi Final 09/08/2017** and agree to delegate my authority to the staff and instructors involved. I understand that teachers will take whatever disciplinary action is needed to ensure students' safety and the orderly conduct of the excursion. If the above student must be returned to the school due to inappropriate behaviour, I will meet the cost of transport.

I authorise teachers to seek medical attention if needed while on excursion and agree to pay any medical expenses incurred on behalf of the above student.

Signed: _____ Parent/Guardian

STUDENT COMMITMENT

I agree to meet the expectations of this excursion and to follow the instructions of the teachers. I will be of good behaviour throughout the excursion.

Signed: _____
Student

Travel Arrangements

My Child's Name _____

My child has had transport arranged for them YES NO

I _____ (name) am providing transport for _____
to the **Independent and Catholic Primary Schools Challenge Rugby League Semi Final 09/08/2017**
YES NO

My current driver's licence number is _____
(Learner and provisional drivers are not permitted to transport students.)

My current vehicle has the following number of lap/sash seat belts available _____
(Do not count front seat if vehicle is fitted with an air bag if student is under 12 years.)

I have comprehensive insurance YES NO
(Must have comprehensive car insurance.)

I have submitted to the front office my Working with Children Check. YES NO

Signed: _____
Parent/Guardian