

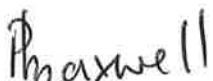



# Sacred Heart Central School

Faith & Knowledge

<b>Event</b>	Mortimer Shield Rugby League and Tag League Gala Day
<b>Date of Event</b>	23 <sup>rd</sup> May 2018
<b>Fees payable</b>	Nil
<b>Venue</b>	Bob Aldridge Park, Temora
<b>Venue Address</b>	Crowley St, Temora.
<b>Time of departure</b>	8:30 am
<b>Time events commence</b>	9:30 am
<b>Time students are expected at the venue</b>	9:00 am
<b>Students to meet</b>	Students travelling with other parents will leave from Sutton Street bus stop.
<b>Transport</b>	Private Car
<b>Uniform</b>	Full sports uniform
<b>School to provide</b>	Playing Uniform, tent, sunscreen, first aid kit, tags
<b>Students to bring</b>	Water bottles, hat, own foot wear
<b>Canteen available</b>	Yes
<b>Teachers attending</b>	Mrs Patrece Maxwell
<b>Special instructions</b>	All parents transporting other students must complete fully the attached form. Please indicate if personal arrangements have been made between families.
<b>Expected event finish time</b>	2:30pm
<b>Return to school</b>	3:00pm

**Permission slip and money to be paid to the front office by *Friday 11<sup>th</sup> May***  
**Failure to return by the due date may mean that students cannot attend the event.**

  
Mrs Patrece Maxwell  
Sports Coordinator

  
Mrs Janet Cartwright  
Principal

**PLEASE RETURN THIS PAGE with any required money to the Front Office in a blue payment envelope by Friday 11<sup>th</sup> May 2018.**

**CONSENT FORM**

As a parent/guardian of \_\_\_\_\_ Class \_\_\_\_\_, I give my consent for him/her to participate in the Mortimer Shield Gala Day 23<sup>rd</sup> May 2018 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 will need transport arranged for them YES NO

I \_\_\_\_\_ (name) can provide transport to the Mortimer Shield Gala Day 23<sup>rd</sup> May 201 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 (Must have comprehensive car insurance.) YES NO

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

I can assist with managing a team. YES NO

Signed: \_\_\_\_\_  
Parent/Guardian