

# Winter Sports Division Finals 2017



Wednesday 19<sup>th</sup> July 2017

Dear Parents/Guardians,

Your child has been selected in one of our school teams to compete in the Winter Sports Division Finals. The sports involved are football and netball.

**When:** Friday 28<sup>th</sup> of July 2017

**Where:** Football - Toomuc Recreation Reserve, Olympic Way, Pakenham, Melways Ref. 215 K5  
Netball - YMCA Cardinia Life, Olympic Way, Pakenham, Melways Ref. 215 K5

**Time:** First games will **start** at 9:30am. We need to be at school around 8:30am and no later than 8:45am so we can be on the bus at 9:00am. The last games will be finished around 12:00pm and we will be returning to school no later than 1:00pm.

**Transport:** Bus - as per our Excursion Policy we will wait no longer than five minutes after the stated departure time. Students who arrive later than this will stay at school.

**Cost:** \$7.00 - Bus.

**Special requirements:** Your child will need to bring appropriate clothing for their sport to change into, (team tops will be provided for the game); school uniform must be worn to and from the event. Football players need to have a mouthguard. The students will need to bring a drink bottle, healthy snacks and asthma medication if required.

**Due date for notice and money:** Wednesday 26<sup>th</sup> July at 9:00am

Regards, Anthony Cole  
Physical Education Coordinator.

(Please detach and return with money to school by **Wednesday 26<sup>th</sup> July 2017 9:00am**)

## Winter Sports Division Finals – Gr 5 & 6

Student's name: ..... Student's Grade.....

I enclose \$7.00 as full payment for the excursion.

Method of Payment (please tick):

Cash

Chq

Bpay

**If using BPAY method, please make sure you send the permission note back the next day.**

I consent to my child taking part in **Winter Sports Division Finals 2017** and where the teacher in charge of the excursion is unable to contact me, or it is otherwise impractical to contact me, I authorise the teacher in charge to:

- Consent my child receiving such medical or surgical attention as may be deemed necessary by medical practitioner,
- Administer such first-aid as the teacher in charge may judge to be reasonably necessary.

Contact number for this excursion: .....

Signature of parent/guardian: .....

Date:.....

The Department of Education and Training requires this consent to be signed for all students attending school excursions.

**PARENT HELPER SECTION:** I am able to help at the Winter Sports Division Finals on Friday 28th July 2017 and I have a current Working With Children Card and I am registered with Beaconsfield Primary School.

Name .....

Contact Phone Number .....

Working with Children's card Number.....