



Valley View Public School

Respect, Responsibility, Personal Best

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7 June 2021

PSSA TOUCH FOOTBALL GAMES

Dear Parent/Caregiver,

The Boys and Girls PSSA touch football games have been scheduled for **Friday 18 June** at Alan Davidson Oval, Wyoming. We will be versing Lisarow Public School.

The boy's team will be playing first at 9:30am. Followed by the girl's team playing at 10:15am. Students will be walking to and from the oval with supervision from Mr Keyes and Mrs Harpur. The games should be finished by **11:00am**, after this, students should return back to school.

Students are to bring plenty of water and some snacks. They will be able to have lunch back at school once the games have finished.

Please ensure your child has sunscreen, a hat and they must wear school sports shorts (navy), appropriate footwear (touch football boots or joggers). We will provide students with a touch football singlet to wear. Don't forget to pack a jumper as it may be cold.

The cost is \$2.00 per student to cover referee fees and ground hire. **Notes and the \$2.00 should be given to Mrs Harpur (girls team) or Mr Keyes (boys team).**

Yours sincerely

Mrs Harpur & Mr Keyes
Coaches

Kirsty Squires
Principal

VALLEY VIEW PUBLIC SCHOOL- PERMISSION NOTE

PLEASE FILL IN AND RETURN TO YOUR CLASSROOM TEACHER

PSSA TOUCH FOOTBALL

I hereby consent to my son/daughterYear Class.....
to participate in the Boys and Girls Touch Football on Friday 18 June 2021 at Alan Davidson Oval.

- I understand students will be walking to Alan Davidson Oval with teacher supervision.
- I understand that there is a cost of \$2.00.
- I understand that a written permission note must be given to the organising teacher if your child is travelling home/being picked up by another parent. Name of Parent picking up your child
- I understand that this permission slip will cover this event/date and any other date **relating to this event** that is changed due to circumstances beyond the schools control

Parents please note there is no personal injury insurance provided by the NSW Department of Education and Training for students in relation to school sporting activities, physical education lessons or any other school activity. Parents and caregivers are advised to assess the level and extent of their child's involvement in the sport program offered by the school, zone, area and state school sport associations when deciding whether your child should attend, whether additional insurance cover, above that provided by Medicare, is required.

Signed Date
Parent / Caregiver

Medical Information Form – this section MUST be filled out

Parent / Caregiver details:

Name.....

Address.....

Phone: Home Work Mobile

Medicare Number

I do / do not give permission for my child to receive medical treatment in case of emergency

Doctor details:

Name

Address.....

Phone: Home Work Mobile.....

Emergency Contacts: (if parents are unable to be reached)

Name Phone.....

Name Phone.....

Existing medical conditions or illnesses: (asthma, diabetes, epilepsy, allergies, etc) Outline treatment -

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Outline **special dietary needs** including possible reaction to inappropriate diet -.....

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Medications to be administered during the excursion: Include name, instructions and time for

administration and any possible reactions -.....

.....

Signature Date

Privacy Notice: The information provided on this form is being obtained for the purpose of safety on the excursion. It will be used by NSW DET for obtaining medical assistance if required. Provision of this information is required by law. It will be securely stored.