

Lea Rd Wamberal NSW 2260 **P**: 02 4384 1111 **F**: 02 4385 2478 **E**: wamberal-p.school@det.nsw.edu.au

Excursion, Performance and Activity Consent Form

21 June 2022

Dear Parents and Carers,

An excursion, performance or activity has been organised for your child. The information is as follows:

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PSSA Knockout Boys and Girls Football
The boys and girls Wamberal Public School Soccer teams will participate in a PSSA gala day. A knockout format with a back draw will be operating throughout the day. Please see draw attached. Each team will play a minimum of two games. 14 players per team.
Tuggerah Sports Complex - 20 Lake Rd, Tuggerah NSW 2259
Monday 27th June 2022
The boys' first game will be at 8:30am. They are required to be at the venue no later than 7:45am. The girls' first game will be at 9:30am. They are required to be at the venue no later than 8:45am. The event should finish about 2:30pm, but depending on wins and losses, it may finish earlier for both teams.
Selected Years 5-6 students will be attending.
Parents are responsible for the transport arrangements of their child to and from the venue. Students are to be accompanied by an adult to and from the venue.
\$8.00 for all participants for field hire. In case of financial difficulties, please contact the Deputy Principal, Mrs Jane Rees.
Mr Foyel and Mr Grimmond-Lee
Mr Foyel and Mr Grimmond-Lee
Soccer uniform will be provided. Please bring your own school hat, socks, shin pads and soccer boots. Students will need to bring a water bottle, sunscreen, recess and lunch on the day. Studs must not be longer than 21mm and must not have any ridges, burring or sharp edges. Soccer boots, shin pads, soccer jersey and shorts
It is essential that every child has a suitable hat, drink bottle, sleeved shirt and ample sunscreen.
Student behaviour is considered when assessing the risk of excursions and extra-curricular events for the health and safety of all students and staff. Students must behave appropriately at all times on excursions. The school's discipline policy applies for the duration of this event.
If you have any questions or require further information regarding this event, please contact the organising teacher: James Foyel or Jack Grimmond-Lee at school on 4384 1111.

Please complete the attached permission note and medical information and return to classroom teacher by Friday 24th June 2022.

Wamberal Public School Excursion, Performance and Activity Consent Form

Privacy Note: The information provided below is being obtained for the purpose of ascertaining relevant medical information, requirements and other health care related needs about the student who is currently enrolled at the school and who may participate in school excursions, sporting activities or other educational or school activities conducted by or in conjunction with Wamberal Public School.

It will be used by officers of the NSW Department of Education to assist planning, to support students, and to minimise risks when conducting school excursions, sporting or other school activities.

Other persons or agencies that may be provided with this information include, but are not limited to, volunteers and members of external organisations who join with the school or are otherwise involved in the planning or delivery of the excursion, sporting or other school activity; and persons that may be called upon to provide health care treatment or other assistance during or as a consequence of such excursions or activities.

Provision of this information is not required by law. However, a failure to provide the information may mean that your child can not participate in a particular excursion or school activity. In such circumstances the school will make available a sound alternative educational experience.

Provision of this information will significantly assist the school in planning a safer educational activity. It will be stored securely. If you have any concerns about provision of this information, please contact the school principal to discuss further.

You may correct any personal information provided at any time by contacting the school office.

TITLE OF EXCURSION, PERFORMANCE OR ACTIVITY: PSSA Soccer Gala Day ORGANISING TEACHER: James Foyel and Jack Grimmond-Lee Permission note due by: Friday 24 June 2022

General Permission Details		Please tick			
I consent to	of Class	_ participating in	1		
PSSA Soccer Gala Day on Monday 22 June 2022	٥	Yes		No	
I consent to the travel arrangements for this event.	٥	Yes		No	
The cost of this event is \$8.00.					
I have paid for the event via the school website and my receipt number	er is $ extstyle extstyle$	Yes		No	
OR I enclose this amount as payment for the event.		Yes		No	
I give permission for my child to receive medical treatment in case of emergency.		Yes		No	
Health Care Needs					
 When a medical practitioner has prescribed medication (including emergency medication) that will need to be administered during the event, parents are responsible for: bringing this need to the attention of the school, including completing a written request to administer medication (forms are available on the school website); ensuring that the information is updated if it changes; supplying the medication and any 'consumables' necessary for its administration in a timely way; ensuring the medication is well within its expiry date; and collaborating with the school in working out arrangement for the supply and administration of the prescribed medication for the duration of the event. For some events, the school will ask parents to supply the medication in a different way to what has already been agreed by the school. For example, parents may be asked to supply an additional adrenaline autoinjector (i.e. EpiPen® /Anapen ®). For asthma and anaphylaxis it is important for students to have immediate access to their medication. Please consider whether your child should carry their own EpiPen ®, 					
Anapen® or asthma reliever medication while at school. Permissions for students to carry their own asthma or anaphylaxis medication can be downloaded from the school website.					
My child has a Health Care Plan at school.	□ Y	es 🗅	N	0	
My child has the following special needs (please provide full details and include any relevant medical details)					
Parent / Carer Details					

Contact Number on the day: _____