

Variation INFORMATION

Please complete and return the attached consent form to the Mr Ellis by the Thursday 6 March.

Dear parent/guardian,

- The Under 14 Rugby League Team will be playing round 1 of the Buckley Shield U/14's Rugby League Knockout on the GTHS School Oval on Friday 7 March 2025. Kickoff at 11am.
- The cost of the excursion is \$3 per student which is to be paid in cash to Mr Ellis by Thursday 6 March. The cost is to pay for a qualified referee.
- On Friday 7 March, students will come out of scheduled classes after period 2 at 10:20am and return to scheduled classes at the beginning of period 5.
- Accompanying staff are: R.Ellis
- School Uniform is to be worn to this excursion. Students will be provided with a GTHS football jersey and shorts for the game, students are responsible for bring their own football socks (black preferably), football boots, a fitted mouthguard and any other padding they use in weekend football (shoulder pads, headgear).

NB. Please not Mouthguards are MANDATORY as per DET guidelines.

- The contact number during the excursion is 9521 3244.



R.Ellis
Coordinator



Mrs V.Koukoutaris
Deputy Principal

Permission Note for Buckley Shield - U/14 Rugby League on Friday 7 March 2025

Please complete and return this consent form to the Mr Ellis by the Thursday 27 February.

CONSENT

I hereby consent to in Year participation in an excursion to School Oval on Friday 7 March 2025.

SPECIAL NEEDS

Special needs of my child which you should be aware (eg. allergies, medication - please provide full details)

MEDICAL

I give permission for my child to receive medical treatment in case of emergency. YES / NO (please circle)

PERMISSION TO PLAY RUGBY LEAGUE / RUGBY UNION

I hereby consent to to play rugby league/rugby union as part of the intra and inter-school sport program of the school. If my child is selected to play in trials and representative games at the zone and area level, I understand that I will be notified and my permission sought.

While I appreciate the efforts made by the school to minimise the possibility of injury, I understand that there will remain some degree of risk inherent in participation in what is essentially a body contact sport. I understand that the wearing of a correctly fitted mouthguard is mandatory in all games and training sessions.

Under no circumstances should my child/ward be allowed to play/trial in the following positions:

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Signature of Parent/Guardian

Name of Parent/Guardian

Date

Privacy Advice

The information provided on this consent form by the parent or caregiver is being obtained for the purpose of conducting a school excursion detailed above. It will be used by the NSW Department of Education for seeking consent for the child to undertake activities within this excursion activity. Provision of this information is required by law / voluntary. It will be stored securely. You may correct any personal information provided at any time by contacting the school on 9521 3244

PAYMENT

Payment for Buckley Shield - U/14 Rugby League. Student Name: _____

I have made a payment online of \$3 for this excursion.

For online payments please go to the school's website at <https://gymeaths.nsw.edu.au> to pay through schoolbytes. Choose Payments and then choose the selected excursion from other items.

Buckley Shield RL Amount: \$3

I have made a payment at the school office of \$3 for this excursion. (Payment made by cash or card)