



Respect

Responsibility

Personal Best

Wednesday, March 17, 2021

Dear Parents and Carers,

An activity has been organised for your child:

Activity	PSSA Soccer Knockout Game
Date	Monday, 22 nd March 2021
Venue	Rovers Field, Lochinvar
Students/Classes	Selected students in the school soccer team
Cost	\$1.00 per student, payable on the day for referee fee
Times/Places	We will leave school at 11:00am. The game starts at 12:00pm. This will allow for a complete warm up.
Transport	Private transport – PLEASE NOTE: if there are not enough parents able to assist with transport, the game will be forfeited.
Supervision	Mrs Kristy Price, Mrs Cheryl Brown, Mr Rob Jarlett, Mrs Sharon Morris
Please bring	Joggers or football boots, a mouthguard, water bottle, hat and shinpads if you have them. (The school does have a supply of shinpads)
Students must wear	Full school uniform to school. They will be able to change before leaving for the game.

Mrs Kristy Price

PSSA Soccer Coordinator

Mrs Sharon Morris

Principal

Medical Disclaimer:

Parents/Carers - please note there is no personal injury insurance cover provided by the NSW Department of Education for students in relation to school sporting activities, physical education lessons or any other school activity. Parents and carers 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 additional insurance cover, above that provided by Medicare, is required. The NSW Supplementary Sporting Injuries Benefits Scheme, funded by the NSW Government, covers any injury resulting in the permanent loss of a prescribed faculty or the use of some prescribed part of the body.



Activity: PSSA Soccer Knockout Game

Date: Monday, 22nd March 2021

Please return this part of the note and money to the School Office no later than Friday 19th March.

Please tick a box below:

- I give permission for my child _____ of class _____ to attend the PSSA Soccer Knockout Game at Rovers Field, Lochinvar. My \$1.00 payment is enclosed.
- I DO NOT give permission for my child _____ to attend.

My child's current medical details are as follows:

Parent/Carer name: _____

Parent/Carer signature: _____