



## Kentlyn Public School | Georges River Road | Kentlyn 2560

PO Box 5222 Minto, 2566 | Phone: 4628 2455 – Fax: 4628 4365

kentlyn-p.school@det.nsw.edu.au

Date: 21/02/2024

### PSSA League Tag Gala Days - Term 1 & 4

#### Eschol Park Sporting Complex, Epping Forest Drive, Eschol Park

Dear Parents/Carers,

We are pleased to advise that our Summer Gala Days will continue in 2024. Students in Years 3-6 are invited to represent the school at the **Term 1** and **Term 4** PSSA League Tag Gala Days to be held at Eschol Park Sporting Complex in weeks 7 and 10 of Term 1 and weeks 2 and 5 of Term 4. Year 3 and 4 students will participate in a mixed junior team and year 5 and 6 students in a mixed senior team.

Where: Eschol Park Sporting Complex, Epping Forest Dr, Eschol Park

When: Term 1: **Friday 15th March and Friday 5th April, 2024** (10:00am-2:00pm)

Term 4: **Friday 25th October and Friday 8th November, 2024** (10:00am-2:00pm)

Transport: Students will be travelling to the venue via bus and should be at school for the usual 9:00am bell time. The bus will depart at 9:15am and return to the school before 3:00pm.

Cost: **\$30** (covers all 4 Gala Days). This payment can be made in two installments:

**Term 1 installment** due: 8th March 2024    **Term 4 installment** due: 27th September 2024

Equipment: Sports uniform, school hat, sports shoes OR football boots (moulded sole only) sunscreen applied before school (sunscreen will be available to reapply throughout the day).

Food/Drinks: Please bring along water, lunch and snacks. There will be a canteen at the venue so students may purchase some additional drinks and food through the day.

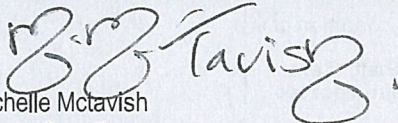
Phones: Students with phones are asked to leave them in the office at the beginning of the day as per our usual arrangements. Phones are not to be taken with students to the venue.

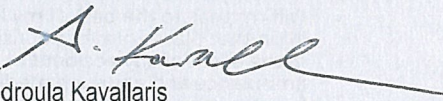
Behaviour: Exemplary sportsmanship and behaviour is expected from all students throughout the day. Poor behaviour may lead to exclusion from future Gala Day activities.

Spectators: Spectators are welcome.

Wet Weather: If there is a cancellation due to wet weather, a notice will be posted on the school Seesaw and Skoolbag apps as soon as we receive that information.

**Please return the new detailed note, signed and with payment to the office by Monday 4th March, 2024. Please note this permission note will be kept on file to acknowledge permission for both Term 1 and Term 4 Gala Days.**

  
Michelle Mctavish  
Sports Coordinator

  
Androula Kavallaris  
Principal

*Please note: School representation and attendance at excursions, special school activities and out of school activities is dependent upon the continued demonstration of appropriate behaviour and an appropriate attitude in all aspects of school life.*



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### Important information for all parents/carers

#### **Concussion Clearance**

The Australian Medical Association recommends students being symptom free of concussion for 14 days before returning to sport.

- If your child/ward sustains a concussion, or experiences any concussion symptoms, in the 14 day period prior to the event commencing, you must report this to team officials, and a medical clearance is required in order for your child/ward to participate in the event.
- Medical clearances can be attached to this consent form or can be submitted to team officials separately.

#### **Important information**

In the event of injury, no personal injury insurance cover is provided by the NSW Department of Education for students in relation to school sporting activities, physical education lessons or any other school activity. The Department's public liability cover is fault-based and limited to breaches by the Department of its duty of care to students that may result in claims for compensation.

Parents/Carers are advised to assess the level and extent of their child's involvement in the sport program offered by the school, school sport zone, region and state school sport Associations when deciding whether additional insurance cover is required prior to their child's involvement in the program. Personal accident insurance cover is available through normal retail outlets.

Parents/Carers who have private ambulance cover need to check whether that cover extends to interstate travel and make additional arrangements, as considered appropriate.

The NSW Supplementary Sporting Injury Benefits Scheme, funded by the NSW Government, provides limited cover for serious injury resulting in the permanent loss of a prescribed faculty or the loss of use of certain prescribed parts of the body. The Supplementary Scheme does not cover medical costs or dental costs. Further information can be obtained from <https://www.icare.nsw.gov.au/injured-or-ill-people/sporting-injuries/payments/#gref>. Further information regarding student accident insurance and private health cover is provided at: <https://app.education.nsw.gov.au/sport/file/1449>.

#### **Recommended for inclusion**

##### **Ambulance / medical treatment**

- I affirm that, to the best of my knowledge, my child/ward has no medical condition or injury that places him/her at risk by participating in this sport activity.
- In the event of any accident or illness, I authorise the obtaining, on my behalf, of an ambulance and any such medical assistance that my child/ward may require. I accept full responsibility for expenses incurred.



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----- please sign and return this part to school -----

**Parent / Carer Consent**

**Student details (please print clearly)**

First name: \_\_\_\_\_ Surname: \_\_\_\_\_ Class/grade: \_\_\_\_\_

**Student Code of Conduct (student to complete)**

I (name) \_\_\_\_\_ agree to abide by all the rules of the events and to obey all requests given to me. I realise that good behaviour will enable me to take part in future events. Misbehaviour has serious consequences.

SIGNED: \_\_\_\_\_  
Student Date

**Student medical details**

Medicare number: \_\_\_\_\_ Expiry date: \_\_\_\_\_

Please detail any medical or special needs which the team manager should be aware of, including medical, behaviour management or other specialised plans. (Copies of plans to be attached.)

\_\_\_\_\_  
\_\_\_\_\_

**Parent/Carer details**

First name: \_\_\_\_\_ Surname: \_\_\_\_\_

I give permission for my child/ward \_\_\_\_\_

of Class \_\_\_\_\_ to attend and participate in the: \_\_\_\_\_

Event: \_\_\_\_\_

Date: \_\_\_\_\_ at Venue: \_\_\_\_\_

**Payment**

- Payment of \$15 is enclosed (1 term)
- Payment of \$30 is enclosed (2 terms)      OR       Online Payment

Receipt # \_\_\_\_\_



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### Permission to Publish student information.

The Department of Education may publish or disclose information about your child/ward for the purposes of event promotion and sharing results. This information may include your child/ward's name, age and school. It may also include information collected during this event such as photographs, live streaming, sound and visual recordings of your child/ward.

The communications in which your child/ward's information may be published or disclosed include but are not limited to:

- the event program and results
- public websites of the Department of Education including the School Sport Unit website
- the Department of Education intranet (staff only), blogs, and wikis
- Department of Education publications including the school newsletter, annual school magazine and school report, promotional material published in print and electronically
- the Department of Education, School Sport Unit and school social media accounts on networks such as YouTube, Facebook and Twitter
- local and metropolitan newspapers and magazines and other media outlets.

Parents/Carers should be aware that when information is published on public websites and social media channels, it can be linked to by third parties and may be discoverable online for a number of years, if not permanently. Search engines may also cache or retain copies of published information.

**Permission to Publish:** I have read the information about disclosing and publishing student information (above) and

I give permission

I do not give permission.

for the Department to publish and disclose information about my child/ward in publicly accessible communications. This permission remains effective until I advise otherwise.

I understand that if I have not given permission to publish, my child/ward's name will not appear in event programs and results.

SIGNED: \_\_\_\_\_  
Parent/Carer Date

### Parent/Carer Acknowledgment and Consent

- I have read the information provided and I hereby consent to my child/ward participating in this event.
- I acknowledge that this event/activity is required to be held in accordance with any current NSW Health COVID-19 Public Health Orders and the NSW Department of Education's policies and procedures.
- I acknowledge and accept that there is a risk that my child/ward may be exposed to COVID-19 whilst attending and participating at this event.
- I confirm that my child will not attend if displaying symptoms of illness, and/or if directed to isolate under public health orders.
- I acknowledge that my child/ward will be under the duty of care of the supervising teacher during the event.
- I acknowledge that if my child/ward seriously contravenes behavioural expectation, they may be immediately excluded from the team. Should this eventuate, I accept full responsibility for my child/ward upon notification of their exclusion by the team manager including the cost return transport and accommodation.
- In the event of any accident or illness, I authorise the obtaining, on my behalf, of an ambulance and any such medical assistance that my child/ward may require. I accept full responsibility of expenses incurred.
- I acknowledge that if my child/ward sustains a concussion, or experiences any concussion symptoms, in the 14-day period prior to the event commencing, I am required to report this to team officials. I further acknowledge that, should this occur, my child/ward will only be permitted to participate in the event, if a medical clearance is provided.
- I affirm that, to the best of my knowledge, my child has no medical condition or injury that places them at risk by participating in this sport activity.
- I can confirm I have completed the "Permission to Publish student information" section.

Name: \_\_\_\_\_

SIGNED: \_\_\_\_\_  
Parent/Carer Date