

## **BUROINJIN PRIMARY SCHOOL GALA DAY**

26/02/2019

Dear Parents and Carers,

Your child has been selected to help **referee** at the ACT PRIMARY SCHOOLS BUROINJIN GALA DAY day as part of their Sports Coaching course. The teacher in charge of this event will be **James Farrell**.

The completed permission note must be returned to the Mr James Farrell (PE office) by **Tuesday 12 March 2019**.

### **IMPORTANT INFORMATION:**

- Venue:** Deakin Touch Football Fields – Makin Place, Deakin ACT 2600
- Date:** Thursday 14 March 2019
- Time:** 8:30am – 2:30pm
- Transport:** Students are to make their own way to the event.
- Cost:** \$0 (*This is part of their Sports Coaching course*)
- Food:** Students need to bring food and drinks for morning tea and lunch. Water bottles can be refilled throughout the day. There is a free BBQ lunch provided for all players and referees.
- Clothing:** Sports sneakers, PE shorts, school PE shirt (A referee bib will be provided on the day).

During school hours, Mount Stromlo's front office can relay messages to staff and students on the excursion.

If you have any questions regarding this excursion, please contact James Farrell on 6142 3444 or via email [james.farrell@ed.act.edu.au](mailto:james.farrell@ed.act.edu.au)

Regards

James Farrell  
Sports Coaching Teacher  
**Mount Stromlo High School**



## MOUNT STROMLO HIGH SCHOOL PERMISSION NOTE FOR BUROINJIN PRIMARY SCHOOL GALA DAY

I give permission for my child \_\_\_\_\_  
to attend the **BUROINJIN GALA DAY** excursion on **Thursday 14 March 2019**.

- Medical Consent provided early 2019 contains current information
- Medical condition has changed and I have downloaded and completed a new Medical Consent form which is attached \*\*

I understand staff accompanying students on excursions will take all reasonable care while the students are in their charge to protect them from injury and to control and supervise their behaviour and activities.

I am aware that staff members are not responsible for injuries or damage to property which may occur on an excursion where, in all circumstances, staff have not been negligent. I will warn my child of the risk to themselves, to others and to property, of impulsive, wilful or disobedient behaviour.

I have read the attached information regarding this excursion and understand what it contains.

Full name of parent (please print): \_\_\_\_\_

Signature of parent: \_\_\_\_\_ Date:    /    /

\*\*If a Student's medical condition has changed a new Medical Consent form must be completed. The form can be downloaded from the School Website - Excursion Tab - <http://www.mountstromlohs.act.edu.au> or contact the front office on 02 6142 3444 for further assistance.