

Merriwa Central School



Valuing individual potential – achieving personal best

17 May 2022

Dear Parents/Caregivers


An excursion has been planned for **Years 7 to 11 Girls 9-a-side Katrina Fanning Rugby League Gala Day to Olympic Park at Muswellbrook on Friday 10 June 2022** for school sport representation.

Travel will be by private vehicle and school bus, leaving Merriwa Central School at 8.30am (students will need to meet at the gates at 8.15am) and returning by 3.00pm approximately. The cost of the excursion is \$5.00 cash to be paid to the office or the driver on the day.

Students are to wear full school sport uniform. Slides and out of uniform hats are not permitted. Hot food will NOT be available on the day and due to COVID-19 restrictions, students will be required to bring their OWN water bottle.

Students **MUST** wear a mouthguard. Students will not be allowed to take the field unless they have one. Mouthguards can be purchased from the pharmacy from \$11.99 (level1). Due to demand, it is best to order these early. Headgear and shoulders pads are also strongly advised. The day will be full contact.

Please sign the Rugby League consent form attached and return to school by **Wednesday 1 June 2022**. The group will be supervised by Mr Vaughan. For further details contact the teacher co-ordinating the excursion.



Darren Noonan
Principal



Lachlan Vaughan
Teacher in charge of excursion

Merriwa Central School

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Merriwa Central School

**Years 7 to 11 Girls 9-A-Side Katrina Fanning Rugby League Gala Day Excursion
Consent Form**

I hereby consent to my daughter _____ participating in the Years 7 to 11 Girls 9-a-side Katrina Fanning Rugby League Gala Day to Olympic Park at Muswellbrook on Friday 10 June 2022.

I understand that travel will be by private vehicle and school bus leaving school at 8.30am and returning at approximately 3.00pm. The cost of the excursion is \$5.00 cash to be paid to the office or the driver on the day.

My daughter has the following special needs (please provide full details and include any relevant medical details)

I understand that my child will receive medical treatment in the case of an emergency. Please return this form with medical information form to school by Wednesday 1 June 2022.

Student Medicare Number: _____

- I can take my child and assist with transport
- I can only take my child
- I cannot assist with transport and my child will need assistance

Students roll class: _____

Signature of Parent/Caregiver: _____

RUGBY LEAGUE / RUGBY UNION CONSENT FORM

Details of Coaches

| NAME OF COACH | QUALIFICATIONS AND EXPERIENCE |
|-----------------|--|
| Lachlan Vaughan | NRL League Safe NRL community coach qualification 15 years of experience in contact sports |
| Emma Piper | NRL League Safe |
| | |
| | |

PERMISSION TO PLAY RUGBY LEAGUE/RUGBY UNION

Principal: _____ School: _____

Principal's signature: _____ Date: _____

I give permission for my child or ward: _____
(Full name)

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 regional 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:

Parent or Caregivers Name: _____
(Please Print)

Signature: _____ Date: _____

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 and caregivers 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 insurance outlets.

Parents 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 use of some prescribed part of the body. The Supplementary Scheme does not cover medical expenses 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>.

Medical Information Form

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

Student name: Class:

Medicare number (optional)

Parent or caregiver contact details

Name:

Address:

Home phone: Work: Mobile:

Doctor contact details

Name:

Address:

Doctor's telephone:

1. 2.

Emergency contact(s) details (nominated by the parent or caregiver as alternate contact)

1. Name: Phone:

2. Name: Phone:

List existing medical conditions or illnesses (include asthma, diabetes, epilepsy, allergies etc.). Outline the treatment for each.

Outline special dietary needs including possible reaction to inappropriate diet

Medication(s) to be administered during the excursion. Include name of medication, instructions for administration, time of administration, and any possible reactions

Signature: Date:

Privacy Advice

The information provided on ___/___/___ [date] by _____ [parent/carer name] is being obtained for the purpose of ascertaining relevant medical information, requirements and other health care related needs about _____ [student name] 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 Merriwa Central School.

It will be used by officers of the NSW Department of Education and Training 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.

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