2021 5/6 WINTER SPORT APPROVAL FORM

April 20, 2021

Dear Parents,

As a part of our 5/6 Interschool Sport program, we will be travelling by bus or walking to the local schools and reserves listed below, to play in the Oakleigh District Winter Sport Competition. The following table outlines where our interschool sport matches will be played this term. Interschool Sport Fees are not included by the 2021 Excursion Levy.

Friday 30th April	**Clarinda vs Amsleigh Park *(Away) – Bus Transport Required*** All teams play at Clarinda Primary School, 1166 Centre Road, Clarinda Victoria 3169	**$8.00**
Friday 14th May	**Amsleigh Park v Sacred Heart *(Home) – (Football Teams Away, Bus Transport Required)*** Netball, volleyball and soccer teams will play at Amsleigh Park. ***The football teams will play at Scammell Reserve, 1216 North Road, Oakleigh South 3167***	**$8.00 *football teams only***
Friday 28th May	**Amsleigh Park v St Mary Magdalen's School *(Home)*** All games at Amsleigh Park. St Mary Magdalen's have 1 netball team, 1 volleyball team and 1 soccer team. Our extra teams will train at Amsleigh Park.	-

Games will be played in the morning, with buses leaving at **9.05am**. We will return to school approximately 11am.

The correct school uniform and water bottle is compulsory for children to participate. As the children are representing Amsleigh Park Primary School they are expected to display appropriate sportsmanship at all times. Mouth guards are recommended for students playing football or soccer as well as shin guards for soccer players. **Please complete the approval & payment form below and return it to the General Office before Tuesday 27th April.**

Kind Regards,
Sam Hayes and the 5/6 Team

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APPS GRADE 5/6 WINTER SPORT & BUS APPROVAL FORM

I give permission for my child_____ in grade _____ to travel by bus to participate in Winter Sport against the other schools in the District on the days they are scheduled in the fixture **or when they are required to be rescheduled**.

☐ **$8 enclosed for my child to travel by bus on 30/04/2021**

OR

☐ **My child is in the football team, $16 enclosed for my child to travel by bus on 30/04/21 & 14/05/21**

I authorise the teachers in charge of the excursion to consent, where it is impractical to communicate with me, to my child receiving such medical or surgical treatment as may be deemed necessary and understand that the Department of Education and Training (DET) does not provide personal accident insurance to students.

Parent Name: _____Signature_____

Contact Phone Numbers _____ _____

_____

CREDIT CARD PAYMENT AUTHORITY* - *MasterCard or Visa only

Student Name: _____ ***Grade:*** _____

Cardholders Name: _____ (Please print clearly)

Signature***:*** _____ Date***:*** _____

Card Expiry Date: _____/_____ **Amount $** _____ *(For APPS YEARS 5/6 Interschool Sport)*

Card number

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