



## Ambarvale High School

Thomas Rose Drive Rosemeadow NSW 2560  
PO Box 90 Campbelltown NSW 2560  
Phone: (02) 4627 1800 Fax: (02) 4628 5289  
Email: ambarvale-h.school@det.nsw.edu.au

Principal: Ms L Barnott-Clement, M.A., M.Ed., B.A., Dip.Ed.  
Deputy Principal: Ms S Arts, M.Ed., B.Sci., Dip.Ed.  
Deputy Principal: Ms E Fitzgerald, B. Health Science, Dip.Ed

### Excursion Information and Consent Rosemeadow Sport Assistant

Dear Parent

Your child has been selected to represent Ambarvale High School in running Rosemeadow Public School's Sport. Year 11 Sports Coaching and Year 10 PASS students will attend and deliver sport as part of their mandatory hours and sports coaching skills development. The students will be assisting the Primary School teachers to run an exciting and interactive sports day for the students. The sport is well structured and organised with student safety as our most important priority. Students will be under the supervision of teachers from Rosemeadow Public School.

Students must meet at Rosemeadow Public School for a meeting about the day at **8:30am**.

**When:** Friday, 8 November 2019

**Start:** 8:30am

**Finish:** 3:00pm

**Where:** Meeting at Rosemeadow Public School - 64 Anthony Drive, Rosemeadow NSW 2560

Parents are responsible for their child's transport and safety prior to departure time at location and following return time at location.

**Cost:** Nil

**What to bring:** Students are required to bring a whistle to referee with, a bottle of water, recess and lunch.

**Dress Code:** Students are required to wear their full sports uniform and appropriate footwear. Hair should be tied back.

Emergency Care

First Aid

Teacher in Charge: Ms L Dellow



Emergency Contact Number: 4627 1800

*Please complete and sign the permission note attached and provide relevant medical information and return to Ms Dellow by Wednesday, 6 November 2019.*

Mr J Garrido  
Relieving Head Teacher PDHPE  
16 October 2019

Ms L Dellow  
Organising Teacher



**Excursion Information and Consent  
Rosemeadow Sports Day**

I give permission for my child \_\_\_\_\_ of Year \_\_\_\_\_ to attend Rosemeadow Public School's sports day on Friday, 8 November 2019. I understand that my child must wear full sports uniform and appropriate footwear and there is no cost.

My Child will be meeting at Rosemeadow Public School and remain there for the day. I understand that my child is required to meet at Rosemeadow Public School at **8:30am** and is not required to attend Ambarvale High School on this day. Parents are responsible for their child's transport and safety prior to departure time at location and following return time at location.

I understand that my child will be supervised by teachers from the involved primary schools, **as teachers from Ambarvale High School will not be in attendance.**

**MEDICAL INFORMATION:**

Medical conditions \_\_\_\_\_

Allergies \_\_\_\_\_

Diet requirements \_\_\_\_\_

Medication \_\_\_\_\_

Other \_\_\_\_\_

Medicare Number (optional) \_\_\_\_\_

**Parent/Emergency Contacts:**

	Name	Contact Number	Relationship to Student
1.	_____	_____	_____
2.	_____	_____	_____

Parent Signature \_\_\_\_\_ Date: \_\_\_\_\_

*Please complete and sign the permission note and return to Ms Dellow by  
Wednesday, 6 November 2019.*