SCHOOL SPORT TRIAL INFORMATION

**Wednesday 24th January**

**SPORT:**

**SURNAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ GIVEN NAMES: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**SCHOOL: CLASS: \_\_\_\_\_\_\_\_\_\_\_\_**

**Instructions:**

**Your student has nominated to compete for the school in trials for the sport listed above. Please complete both sides of this form to confirm the student’s nomination. Return the completed form to (Insert Sports Coordinators name) by the due date; failing to do so may jeopardise the student’s nomination and/or selection chances.**

**WITHDRAWAL POLICY: Parents/Guardians and students should note that once selected for a Port Curtis team, students are not expected to withdraw unless there are extenuating circumstances. It is the policy of the Port Curtis District Secondary Schools Sport Management Committee (PCDSSSMC) that any student who withdraws from a team for unacceptable reasons (as determined by an executive/member of the PCDSSSMC) will be ineligible for selection in subsequent Port Curtis sports for one year.**

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**TRIAL INFORMATION**

**Date of Trial:**

**Venue:**

**Transport: Cost:**

**All students must bring their own water bottle. Students are to wear the (Insert School) School Uniform or the singlet provided**

**Students need to need to inform the convenor at the start of the trials if they don’t want to be selected in the Port Curtis Team to compete at Capricornia trials.**

**SURNAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ GIVEN NAMES: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_D.O.B \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**I hereby give permission for my son/daughter to attend the Port Curtis Trials for the sport of**

**CONSENT FORM**

**• I agree to pay all medical expenses incurred on behalf of the above-mentioned student.**

**• I further authorise medical information about the above student and include details of limitations which she/he has for the activity concerned.**

**• I give consent for photographs to be taken of my child participating in the trial and for use of these photos in educational materials and further media promotion if necessary. YES/NO**

**• INSURANCE COVER FOR STUDENTS UNDERTAKING PHYSICAL ACTIVITIES. Physical activity & physical education, particularly contact sports, carry inherent risks of injury. Parents are advised that the Department of Education, Training & Arts does not have Personal Accident Insurance cover for students. Education Queensland has public liability cover for all approved school activities & provides compensation for students injured at school only when the Department is negligent. If this is not the case, then all costs associated with the injury are the responsibility of the parent/caregiver. It is a personal decision for parents as to the type and level of private insurance they arrange to cover students for any accidental injury that may occur.**

**• I have read and understand the WITHDRAWAL POLICY and possible consequences for withdrawal from Port Curtis sporting teams.**

**• I give permission for my child to travel with the teacher or parent/s in charge to and from the Port Curtis Trials if necessary. I am aware that the parents involved and the school are not legally culpable for this private transport.**

**Parent/Guardian Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**1. If selected in the Port Curtis team, does your son/daughter have permission to compete at the Capricornia Trails? YES NO**

**Date: Venue: Approximate Cost:**

**2. Will they be available for Capricornia selection to compete at State Titles? YES NO**

**Date: Venue: Approximate Cost:**

**MEDICAL INFORMATION**

**1. Does your son/daughter suffer from the following medical conditions? Please provide details.**

**(a) Heart problems YES/NO**

**(b) Respiratory Problems YES/NO**

**(c) Allergies YES/NO**

**(d) Travel sickness…………. YES/NO**

**(e) Low/High Blood Pressure YES/NO**

**(f) Epilepsy…………………… YES/NO\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**(g) Recent Illness……………… YES/NO\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**(h) Recent Operations . YES/NO**

**(i) Diabetes YES/NO**

**(j) Phobias YES/NO**

**(k) Bed-wetting YES/NO**

**(l) Drug Reactions YES/NO**

**(m) Dietary Considerations YES/NO**

**(n) Other Medical Conditions YES/NO**

**2. Are your son/daughter’s injections (eg. Tetanus) up to date? YES/NO 3.Please list any medications your son/daughter is required to take together with the prescribed dosage.**

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**Is there any medical or psychological reason to prevent your child from participating in any of the activities outlined in the information sheet? Please contact the teacher involved or outline the situation in writing.**

**EMERGENCY CONTACT In an emergency, please contact:**

**NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship to Student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PHONE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Closing date for application:

SPORT: **13**-**15 and 16 - 19 Years Girls Football (Soccer) (2011, 2010, 2009, 2008, 2007, 2006, 2005)**

SURNAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ GIVEN NAMES: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SCHOOL: **Tannum Sands SHS**

**Instructions:**

Your student has nominated to trial for selection in the sport listed above. Please go to the link below to load the 15-page student permission booklet, and complete it.

<https://capsport.eq.edu.au/support-and-resources/forms-and-documents>

Return the **completed booklet and travel arrangements** to Mr Sternberg in SR2 or by email lster4@eq.edu.au by the due date; failing to do so **will** jeopardise the student’s nomination and / or selection chances.

**Withdrawal Policy:**

Please note that once selected for a Port Curtis team, students are not expected to withdraw unless

there are extenuating circumstances.  It is the policy of the Port Curtis District Secondary Schools

Sport Association (PCDSSSA) that any student who withdraws from a team for unacceptable reasons (as determined by the executive of the PCDSSSA) will be ineligible for selection in subsequent Port Curtis sports for one year from the date of the ban.

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# **TRIAL INFORMATION**

**Date of Trial:** Wednesday 31st January 2024

**Venue**: Clinton Soccer Fields

**Time:** 2 – 4 pm

**Transport:** Arrange own transport and return travel arrangements form.

**Equipment:** Students are to wear the school uniform and bring hat, sunscreen and water bottle.

Students MUST wear shin guards and appropriate footwear i.e. football boots.

Mouthguards are recommended.

**Capricornia Trials:** Students who trial must be competitive, willing and able to attend Capricornia trials in Gladstone on Thursday 15th February 2024.

**State Trials:** 16th – 19th May Met East

Students are to keep this and return the 15 page booklet to the Sports Coordinator.