



JAMES NASH STATE HIGH SCHOOL

A.B.N 84 190 394 644

PO Box 492 / 109 Myall Street, Gympie Qld 4570

Phone: (07) 5480 6333 Fax: (07) 5480 6300

Email: the.principal@jamesnashshs.eq.edu.au Website: www.jamesnashshs.eq.edu.au

CRICOS Provider: Dept of Education and Training CRICOS No.: 00608A

30th July, 2017

Dear Parent/Guardian

Your son/daughter has been selected to represent James Nash SHS at the **Gympie District Athletics Championships** at Albert Park, Gympie on **Thursday 10th and Friday 11th August, 2017**. I seek your permission for him/her to compete in this championship and would appreciate the return of the permission and medical form by Friday 4th August, 2017. The program of events for both days is attached. If your child is involved in the 3000m event, please see notes below.

This carnival enables students to qualify for the Wide Bay Regional Carnivals on:

10 – 12 Years – 23rd August 2017 at North Burnett Region

13 – 19 Years – 11th & 12th September 2017 at Gympie

Students have the option of being transported to and from the event by bus; however, some students may choose to return to school after their event via private transport through a parent or caregiver. Any students wishing to return to school after their event must have parental consent forms clearly marked below and comply with the conditions outlined.

- Venue:** Albert Park
Time: 8:00-2:30pm– Athletes must be there at least ½ hour prior to their event start time.
Transport: A bus for students will be leaving school at 8:50pm and arrive back at school by 3pm.
Cost: \$4 nomination fee. Paid to the office.
\$3 for the bus
Clothing: School uniform is compulsory.

3000m 13-19 years Event Details

- Date:** Tuesday 8th August 2017
Venue: Gympie State High School – Willows Oval Athletic Track.
Time: First race will be at 3:30pm.

Students **MUST** wear their full school uniform while at this event and are reminded that specific codes of conduct and etiquette for various sporting events and venues will apply. School running singlets are available for use while competing. Students are also reminded to stay well hydrated throughout the day and comply with the School Sun Safety Policy. Canteen facilities will be available at the venue.

Students are required to sign in with Ms Randall each day when they arrive.

Students are not to leave the grounds under any circumstance without written permission or unless they have a parent collect them.

Kind regards

K Knight

Mrs K. Knight
Head of Sport JNSHS

Great state. Great opportunity.





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GDSS ATHLETICS CHAMPIONSHIPS MEDICAL FORM 2017

Student Name: _____

Date of Birth: _____

Emergency Contact: Name: _____

Phone: _____

Mobile: _____

MEDICAL FORM

1. My son/daughter has been immunised against (Please show year immunised if known):

2. Date of last anti-tetanus injection: _____

3. My son/daughter is known to be allergic to: _____

4. My son/daughter suffers from Asthma: yes / no

Medication available: _____

5. My son/daughter is currently taking medication: yes / no

If yes, please give details: _____

6. Is your son/daughter suffering from an injury or condition that is likely to be aggravated by the competition?

yes / no. If so, please give details: _____

7. Any relevant medical history: _____

8. Medical Insurance Details: _____

(a) Is your son/daughter issued with his/her own Medicare Card? yes / no

(b) If "NO" please state Medicare Card Holder's name (This is the first name on the card)

(c) State your son/daughter's or family Medicare Membership Number:

(d) Detail any additional health benefits: eg Private Hospital, Ancillary, Dental etc:

(e) Additional Health Insurance Company and Membership Number: _____

(f) Does your son/daughter have a Personal Accident Insurance cover against accident/injury for competitions and associated activities (training, travel etc)? yes / no

If so, detail the type of cover: _____

A supervisor with a current First Aid Certificate will be in attendance at each match and/or sports medicine personnel where possible. Please be aware that this is a competitive sport and there is an inherent risk of physical injuries occurring. Parents are advised that the Department of Education and Training does not have Student Accident Insurance cover for students. Injuries may occur without any negligence on the part of the school and in such circumstances the responsibility for the injury and any associated costs will rest with you, not the school. Please take this into consideration in deciding whether or not to allow your child to participate in this school sport. You may choose to obtain private insurance coverage, and the school would appreciate details of any medical/accident insurance you have in place for your child.

I hereby authorise the obtaining on my behalf of such medical assistance as my son/daughter may require in the event of an accident or illness and guarantee to meet any costs incurred. I authorise the administering of anaesthetic if the medical officer attending deems this necessary.

Parent/Guardian's Signature: _____ **Date:** _____



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GDSS ATHLETICS CARNIVAL PERMISSION FORM 2017 DUE FRIDAY 4th AUGUST 2017

Student Name: _____

ATTENDANCE INFORMATION

Please select one of the following options for attendance at the event:

- My child will be attending both Thursday and Friday
- My child will be attending on Thursday only
- My child will be attending on Friday only

TRANSPORT INFORMATION

Please select one of the following options for transport:

- My child will catch the bus to and from Albert Park with the team (Bus return - \$3 each day)
- My child will catch the bus to the venue, but will arrange private transport via parent/caregiver after their event (Bus one way - \$2 each day)
- My child will arrange private transport to their event via parent/caregiver, but catch the bus back to JNSHS (Bus one way - \$2 each)
- My child will arrange private transport via parent/caregiver to and from the venue

PERMISSION FORM – DUE FRIDAY 4TH AUGUST 2017

I _____ give consent for my child _____
Parent/Guardian's name *Student's name*

to compete at the Gympie District Athletics Championships at Albert Park, Gympie on Thursday 10th and/or Friday 11th August 2017. We understand the requirements outlined above for this activity.

Parent/Guardian's Signature: _____ Date: _____