



**WILLYAMA  
HIGH SCHOOL**  
CONNECT • INSPIRE • EXCEL - TOGETHER

Principal: Mr Grant Shepherd

20 September 2022

Dear Parents/Carers

**Re: Netball Schools Cup – Knockout Competition Final**

**Where** : Orange

**When** : Tuesday 11 October – Thursday 13 October 2022

<b>Tuesday 11 October</b>	Arrive at school <u>6.45am</u> for a 7.00am departure
<b>Wednesday 12 October</b>	Game day: 8.00am – approximately 3.30pm
<b>Thursday 13 October</b>	Leave Orange 6.30am and return to WHS approximately 5.30pm

**Transport** : Mini bus driven by Miss Camilleri

**Cost** : **\$250** - payable to Front Office or on our school website  
via the 'Make a payment' tab by Monday 10 October 2022.  
School website: <https://willyama-h.schools.nsw.gov.au/>

**Accommodation:** Canobolas Caravan Park

Please see additional information and packing list on the following page.

Please sign and return the attached Medical Form and Excursion Consent including permission for students to travel in the bus with Miss Camilleri.

If you have any further questions please contact Miss Emma Camilleri at the school on 8088 1055.

Yours faithfully

Emma Camilleri  
Trip organiser

Grant Shepherd  
Principal

- Additional :** Students will need their own spending money to purchase:
- Lunch, snacks and dinner on Tuesday and Wednesday
  - Bowling Wednesday night
  - Breakfast, snacks and lunch on Thursday

**Packing list :**

- Netball – school netball dress, academy polo or training top, school jumper or academy jumper, netball/sport shoes, socks and sport shorts for under dress.
- Students own responsibility for ankle and knee braces or strapping
- Casual clothes for both travel days and free time on Wednesday after the games
- Toiletries and towel
- Water bottle
- Pillow (optional)

## EXCURSION CONSENT AND MEDICAL FORM

Excursion: <b>Netball Schools Cup – Knockout Competition Final</b>	
Teacher: <b>Miss E Camilleri</b>	Date: <b>Tue 11 October – Thur 13 October</b>

### Student code of Conduct (student to complete)

I (name) \_\_\_\_\_ agree to abide by all the rules of the events and to obey all requests given to me. I realise that good behaviour will enable me to take part in future events. Misbehaviour has serious consequences.

Student:

SIGNED:

Date

### Medical Information

This information is being obtained for the purpose of maintaining the students' well-being during the excursion or in case of a medical emergency. It will be used by the Department of Education and Training solely for the duration of this excursion.

Student Medicare Number \_\_\_\_\_

	Parent/Carer 1	Parent/Carer 2
Name and Relationship:	_____	_____
Address:	_____	_____
Phone – Home:	_____	_____
Phone – Mobile:	_____	_____
Phone – Work:	_____	_____
Doctors Name:	_____	
Address:	_____	
Contact number:	_____	

## Medical Conditions

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

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Outline special dietary needs including possible reaction to inappropriate diet

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Any medication to be administered during the excursion. Include name of medication, instructions for administration, time of administration and any possible reaction.

Medication Name	Instructions

## Concussion Clearance

The Australian Medical Association recommends students being symptom free of concussion for 14 days before returning to sport. Students who have suffered a concussion within 14 days of the event, must provide written clearance from a medical practitioner prior to participating.

- I understand I am required to report a concussion diagnosis to the team officials.
- I acknowledge that if my child/ward has suffered a concussion within 14 days of the event commencing that a medical clearance is required and must be submitted to team officials.
- Medical clearances can be attached to this consent form or can be submitted to team officials separately.

## 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 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 parts of the body. The Supplementary Scheme does not cover medical costs 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>.

### **Permission to Publish Student information**

The Department of Education may publish or disclose information about your child/ward for the purposes of event promotion and sharing results. This information may include your child's/ward's name, age and school. It may also include information collected during this event such as photographs, live streaming, sound and visual recordings of your child/ward.

The communications in which your child's/ward's information may be published or disclosed include but are not limited to:

- The event program and results
- Public websites of the Department of Education including the School Sport Unit website
- The Department of Education intranet (staff only), blogs, and wikis
- Department of Education publications including the school newsletter, annual school magazine and school report, promotional material published in print and electronically
- The Department of Education, School Sport Unit and school social media accounts on networks such as YouTube, Facebook and Twitter
- Local and metropolitan newspapers and magazines and other media outlets

Parents should be aware that when information is published on public websites and social media channels it can be linked to by third parties and may be discoverable online for a number of years, if not permanently. Search engines may also cache or retain copies of published information.

Permission to publish: I have read the information about disclosing and publishing student information (above)

**Permission to Publish**

**Yes** ☐

**No** ☐

For the Department to publish and disclose information about my child/ward in publicly accessible communications. This permission remains effective until I advise otherwise.

I understand that if I have not given permission to publish, my child's/ward's name will not appear in event programs and results.

Name:

SIGNED:

Parent/Caregiver

Date

### **Parental Acknowledgment and Consent**

- I have read the information provided and I hereby consent to my child/ward participating in this event and travelling in a vehicle with Miss Emma Camilleri.
- I acknowledge that this event/activity is required to be held in accordance with any current NSW Health COVID-19 Public Health Orders and the NSW Department of Education's policies and procedures. I acknowledge and accept that there is a risk that my child/ward may be exposed to COVID-19 whilst attending and participating at this event/ I confirm that my child will not attend if displaying symptoms of illness, and/or if directed to isolate under public health orders.
- I acknowledge that my child/ward will be under the duty of care of the supervising teacher during the event.
- I acknowledge that if my child/ward seriously contravenes behavioural expectation, they may be immediately excluded from the team. Should this eventuate, I accept full responsibility for my child/ward upon notification of their exclusion by the team manager including the cost return transport and accommodation.
- In the event of any accident or illness, I authorise the obtaining, on my behalf, of an ambulance and any such medical assistance that my child/ward may require. I accept full responsibility of expenses incurred.
- I acknowledge that if my child/ward sustains a concussion, or experiences any concussion symptoms, in the 14-day period prior to the event commencing, I am required to report this to team officials. I further acknowledge that, should this

occur, my child/ward will only be permitted to participate in the event if a medical clearance is provided.

- I affirm that, to the best of my knowledge, my child has no medical condition or injury that places them at risk in participating in this sport activity.
- I can confirm I have completed the "Permission to Publish Student Information" section.

Name:

SIGNED:

Parent/Caregiver

Date