



Australian Government
Australian Sports Commission

SPORTING
Schools

SPORTING SCHOOLS APPLICATION FORM

Dear Parents

Sacred Heart Primary School students are getting active as part of the Sporting Schools programme.

This programme has been developed to encourage students to increase their physical activity levels and improve skills in a fun, safe and inclusive environment. The Sporting Schools programme provides quality and structured physical activity and sport, after school.

This programme offers a variety of activities to participating students. A diverse and dynamic programme has also been put together for students to enjoy.

Although the program is open to all students, this programme is designed for the student who may not be getting the recommended daily physical exercise that he or she needs to maintain a healthy lifestyle and as such, we would like to encourage students who are less active and who would not normally be involved in physical activity outside of school time to sign up.

There are limited places each term, so students will be selected on a first come, first served basis.

Jr. Jack Attack Bowls: Yrs 4-6

When: Weeks 7-10

Meeting Place: Senior Quad

Session 1: Monday 13 March

Time: 3:00 pm – 3:45 pm

Session 2: Monday 20 March

Session 3: Friday 31 March

Session 4: Monday 3 April

Yours sincerely
Callan Leach



Sporting Schools – Parent/Guardian Consent Form
Please complete a separate form for each child participating

Term One
Activity(s)
being delivered

Jr. Jack Attack BOWLS

Child details: (to be completed by Parent\Guardian)

First Name							Last Name					
Date of Birth			/			/	2	0			School Year	
Sex	Male	<input type="checkbox"/>	Female	<input type="checkbox"/>								
Is child of Aboriginal or Torres Strait Islander Origin?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>								
Does your household speak any languages other than English at home?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>								
If yes, what other languages does your household speak?	<input type="text"/>											
Are you registering another child in the 'Sporting Schools Programme' this term?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>								

Parent\Guardian details: (to be completed by Parent\Guardian)

First Name							Last Name									
Relationship to Child	<input type="text"/>															
Postal Address	<input type="text"/>															
Suburb\Town	<input type="text"/>															
State\Territory	<input type="text"/>	<input type="text"/>	<input type="text"/>									Postcode	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Daytime Phone Number	()						Afterhours Phone Number	()								
Mobile Phone Number	<input type="text"/>															



Consent Authority: (to be completed by Parent/Guardian)

As the parent or legal guardian of the child named above (**my child**), I give my permission for my child to participate in the Sporting Schools program activities specified above to be conducted by the School named above.

- 1 I give my permission to the supervisors of the activities appointed by the School to implement the School code of conduct and/or take other reasonable measures to ensure the successful conduct of the activities and safety and well-being of the activity participants.
- 2 In the event of any injury or illness to my child, I authorise the supervisors to apply or arrange first aid and to arrange examination by a registered medical practitioner and, if contact with me is impracticable or impossible, to arrange whatever medical treatment the registered medical practitioner considers necessary at that time. I will pay all medical expenses incurred on behalf of my child.
- 3 I agree to release the School from any liability to my child or myself in relation to any injury or illness that my child may suffer and for loss or damage to property, in connection with the activities except to the extent that liability arises as a result of the negligence of the Sporting Schools Programme.
- 4 I agree to release the Australian Sports Commission (ASC) from any liability to my child or myself in relation to any injury or illness that my child may suffer and for loss or damage to property in connection with the activities, except to the extent that liability arises as a result of the negligence of the ASC.
- 5 I acknowledge and agree that the School collects personal information for the purposes of conducting the activities and that the School may provide the personal information to the Sporting Schools Coordinator for the purposes of administering, evaluation and reporting.

I have read, understood and agree to the above terms and conditions.

Name

Signed

Date