



Grose View Public School

~ *A future focused school* ~



Education
Public Schools

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11 August 2022

Dear Parents/Carers

2022 HAWKESBURY CUP NRL GALA DAY

Your child _____ has nominated to participate in the 2022 Hawkesbury Cup NRL Gala Day. We are taking one senior team (U12) to participate against students aged between 11-12 years old.

The Gala Day will be held on Tuesday 20 September at Windsor Sporting Complex. Travel to and from Windsor will be by private vehicle. Your child will need to be at Windsor Sporting Complex by 8.30 am and be collected at approximately 2.00 pm.

This Gala Day will have modified rules and **does require tackling**. All students will be supplied with a Grose View Public School jersey and it is highly recommended that they wear head gear **and** a mouthguard.

To ensure students are competition ready, we would like to run extra training sessions over the next few weeks in the lead up to the Gala Day before/after school. Students will also have training sessions during lunch times.

Students will be given their uniform to wear, including a jersey, playing shorts and socks, but will need football boots, protective wear and a school hat. Students will need to bring the following: head gear; mouth guard; packed recess and lunch; drink bottle; and sunscreen.

A canteen or BBQ may also operate on the day if students wish to bring money.

Please complete the permission note below and return to school by **Wednesday 17 August 2022**.

Yours sincerely

Mrs Tamara Hopkins
Assistant Principal

GROSE VIEW PUBLIC SCHOOL 2022 Hawkesbury Cup NRL Gala Day

I give permission for my child _____ of class _____ to participate in the 2022 Gala Day on Tuesday 20 September at Windsor Sporting Complex.

- I am able to transport **my child** to Windsor **and** _____ **additional students**.
- I will need transport for my child **to and from** Windsor Sporting Complex.
- I give permission for my child to **play tackle NRL** in mixed teams.
- My child can attend the before/after school training sessions

Parent/Carer Signature: _____ Date: _____

Emergency contact phone number on the day: _____

Medical needs or information: _____