



 Online Form - Summer PSSA

Activity Name:	Summer PSSA
Date/Time:	<ul style="list-style-type: none">Friday 16 February 2024 11:45am - Friday 12 April 2024 2:30pmFriday 25 October 2024 11:45am - Friday 22 November 2024 2:30pm
Description:	Your child has been selected to represent Hunters Hill Public School in PSSA in Terms 1 and 4. This involves travelling to and from various sporting fields by bus each week, commencing Friday 16th February. Our school has entered teams for Softball (Girls and Boys), T-Ball (Girls and Boys), Newcomb Ball/Volleyball (Mixed Junior and Senior) and Cricket (Mixed Senior and Junior).
Cost:	\$200.00
Venue:	Local PSSA Venues
Transport:	Transport to and from the venues will be by bus. Students will depart school at 11:45am and return to school at 2:30pm
Dress Code:	Students representing the school will be expected to wear the team uniform. The T-Ball and Softball uniform consists of the school sports uniform. Cricket uniform consists of the school sports top and plain white cricket pants or school sport shorts. Due to extended time in the sun all team members are expected to wear the school broad-brimmed hat to all games to help protect them from the sun while fielding. We also encourage students to pack sunscreen.
Please Bring:	Playing equipment will be provided by the school with the exclusion of a male personal protector, which cannot be provided by the school due to hygiene reasons, and is compulsory for senior cricket. Some students have their own playing equipment, and we encourage them to bring this to use if they feel comfortable. Please make sure all equipment is labelled. Students are to be responsible for all personal equipment they bring with them.
Additional Information:	Students will receive a copy of the PSSA Code of Conduct. For students to attend PSSA this will need to be read and agreed to by both the student attending and parents.
Due Date:	Friday 8 March 2024

* indicates a required field

I have read the above details and give consent for my child, to attend the Summer PSSA *

Yes No

Student Name:

Parent/Carer Name: *

Parent/Carer Phone Number: *

Emergency Contact Name: *

Emergency Contact Phone Number: *

Medical Conditions (including any medication required):

Dietary Requirements:

Parent/Carer Signature: *

Please note: Once you have submitted this consent form, payment can be made via the 'Make Online Payment' button located on this page.