## **BARRON RIVER 10-12 YEARS SCHOOL SPORT**

#### TRIAL NOTICE - GIRLS RUGBY LEAGUE

Dear Parent/Caregiver,

We are pleased to invite your child to trial for the Barron River Girls Rugby League representative team.

The details of this trial are as follows:

Trial Dates	Monday 29 May and Monday 5 June		
Trial Venue	Holy Cross School oval, Reed Rd, Trinity Park		
Time	3.30pm – 4.30pm		
Equipment	Mouth guard and closed in shoes (footy boots are preferable)		
Eligibility	All students born in 2005 and 2006 are invited to trial.		
Training Dates and Times (if selected)	Monday 12 and Monday 19 June 3.30 – 4.30pm as well as Monday 10 July (Term 3)		
Peninsula Regional Championship Information (if selected for Barron River)	Peninsula Carnival – Thursday 13 July Jones Park, Mann St, Cairns Peninsula Selection Trials – Friday 14 July, Jones Park (as above)		
State Championship Information (if selected for Peninsula)	Saturday 2 Sept – Tuesday 5 Sept 2017 Mackay Stadium, Mackay		
Team Manager	Karen Arthur 0409 749 569 kaart0@eq.edu.au	Team Coach	Joel Gekk

Please retain this information sheet for future reference, in the event that your child is successful in gaining Barron River selection.

All students attending this Barron River trial <u>must</u> bring the **Barron River School Sport Consent Form** as well as the **completed Peninsula Region paperwork** with them. These forms will be collected and kept for our records. Your assistance and support is appreciated.

We wish your child every success with their sporting endeavours.

#### **Ayton Russell**

Delegate to the Chair, Barron River District School Sport Holy Cross School 07 4057 6920 arussell2@cnscatholic.gld.edu.au

#### **Jonathon Pont**

Secretary, Barron River District School Sport Freshwater State School 07 4058 9222 jpont8@eq.edu.au

### **BARRON RIVER 10-12 YEARS SCHOOL SPORT**

### **CONSENT FORM – GIRLS RUGBY LEAGUE**

## **PARENT CONSENT**

Student's Full Name (Please Print):		
Date of Birth (DD/MM/YYYY):		
Current School:		
As Parent/Guardian, I give approval for participation in the Barron River 10-12 Years School Sport District Trial and for team officials to contact my child by phone or email during the representative season, but <a href="strictly-in-sport-specific business-only">strictly-in-sport-specific business-only</a> .		
Parent/Guardian Name:		
Parent/Guardian Signature:		
Emergency Contact Number:		
Please list any relevant medical history/information		

# **IMPORTANT** – Complete this form and bring to the Barron River trials.

#### **Barron River 10-12 Years School Sport**