Dear Parents

Students in Years 3, 4, 5 and 6 will be participating in an Eagle Tag Gala Day, where the children will compete against other schools within the Northern Beaches Cluster of Catholic Schools.

The **Year 3 and 4 Gala Day** will be held on **Tuesday 2nd July, 2019** at North Narrabeen Reserve, Walsh Street, North Narrabeen.

The **Year 5 and 6 Gala Day** will be held on **Thursday 4th July, 2019** at North Narrabeen Reserve, Walsh Street, North Narrabeen.

**Time:** Be at school by 8.30 am for Roll Marking and 9.00 am bus.

**What to wear:** Full Sports Uniform with School hat. Rubber studded football boots are permitted. Please wear your sandshoes and bring your football boots in your bag. Bring hat, wet weather gear and a jacket.

**Please bring:** Recess, lunch, fruit break, refillable water bottle filled with water, warm clothes and rain gear, hat and sunscreen.

**Parent helpers:** We cannot run the Gala Day without a parent manager for each team. Your role on the day will be to rotate the children in the team so they all have an even turn. You do not need to umpire and you need no Eagle Tag experience. You will be needed from 9.30 am till 1.30 pm.

Please indicate if you are able to assist with your child’s team.

Yours in Sport

Vanessa Wallace
(Physical Education Teacher)
EAGLE TAG GALA DAY PERMISSION 2019

I give permission for my child ................................................................. in class ............ to participate in the Eagle Tag Gala Day, and to travel to and from North Narrabeen Reserve by bus on :-

☐ Year 3 and 4: 2nd July, 2019, as detailed in this note.

☐ Year 5 and 6: 4th July, 2019, as detailed in this note.

I am able to help at the Gala Day: Yes / No

☐ I will meet at North Narrabeen Reserve at 9.30am

☐ I would like to travel with Staff & Students on the 9.00am bus

Name: ________________________________________ Contact Number: ____________________

MEDICAL INFORMATION

Does your child have a medical condition that the teacher should be aware of? YES/NO

If yes please explain________________________________________________________________

Will it be necessary to give any medication whilst on this excursion? YES/NO

If yes please provide details _______________________________________________________

Does your child have any allergies (eg insect bites, food)? YES/NO

If yes please explain________________________________________________________________

Emergency Contact for this day: Name_________________________ Phone____________________

Signed: ________________________________ (Parent/Guardian)

Date: __________________________