



Dear Parents and Carers,

PSSA SOCCER & NETBALL – 2022

Your child has been selected to represent the school in the Western Suburbs Primary Schools Sports Association (PSSA) Soccer/Netball Competition. The team will play against other schools in our zone each Friday throughout Terms 2 & 3, 2022. Games start at 12:30pm, with the junior teams usually playing first. **Our first game will be Friday, 6 May 2022 (weather permitting). A copy of the PSSA draw will be emailed to parents at the beginning of Term 2.**

Students must wear the team uniform (provided next term), and bring a hat and a drink bottle. **Soccer teams will also need their own shin pads and boots**, to be brought to school to change into prior to the game. Netball players are required to wear either school shorts or school skort with their netball shirt. Students should wear their team uniform to school on Fridays and bring their additional equipment, regardless of the weather. Additional information, including results, can be found at: <https://www.innerwestpssa.nsw.edu.au/>

Please return signed permission note below to your PSSA coach by Monday 2 May 2022

PERMISSION NOTE MUST BE RETURNED BY THIS DATE OR YOUR CHILD WILL NOT BE ABLE TO PARTICIPATE.

The cost is \$120.00 (\$8.60 per week for 14 weeks non-refundable) which will be invoiced shortly.

Ms Patterson, Ms Jones & Ms Duggan
PSSA Coaches

SAVE THIS PORTION OF THE NOTE FOR YOUR REFERENCE



PSSA SOCCER / NETBALL – 2022

I give permission for my child _____ in class _____
to participate in PSSA Soccer / Netball on Friday afternoons in Terms 2 and 3 2022.

I acknowledge that this event/activity is required to be held in accordance with any current NSW Health COVID-19 Public Health Orders and the NSW Department of Education's policies and procedures. I acknowledge and accept that there is a risk that my child may be exposed to COVID-19 whilst attending and participating at this event. I confirm that my child will not attend if displaying any symptoms of illness, and/or if directed to isolate under public health orders.

Please outline any special requirements or medical needs *(attach additional information if required)*

Parent's signature: _____

Date: _____