

## **PSSA Netball Knockout Competition**

Monday, June 7<sup>th</sup> 2021

Dear Parents/Caregivers,

Your child has progressed to the next round of the PSSA Netball Knockout Competition. The game is scheduled for **Tuesday, June 22<sup>nd</sup> 2021**. This game will be against Bermagui Public School and will take place at the netball courts located at Bermagui Country Club. Students should arrive at 10:30am ready for the game to begin at 11:00am. Students will need to arrange their own way to Bermagui.

Due to COVID-19, Parents/Caregivers who attend you will not be able to sit with your child's team and will need to observe physical distance regulations. In addition, in following the Department's COVID-19 safety requirements, no student/parent should attend the venue if awaiting COVID test results, or if displaying flu-like symptoms

Players will be provided with a MPS netball uniform, which will be provided to them the day before the game. Players must ensure they have appropriate footwear, pack sunscreen, a hat and drink bottle. Players must ensure their finger nails are cut and that they are not wearing any jewellery.

Please return permission notes to Miss Patterson by Friday, June 11<sup>th</sup> 2021.

Regards, Caitlin Patterson Netball Co-ordinator

> Merimbula Public School PSSA Netball Knockout – Tuesday, June 22<sup>nd</sup> 2021 Please return permission note to Miss Patterson by Friday, June 11<sup>th</sup> 2021.

Dear Miss Patterson,

I give permission for my child \_\_\_\_

class \_\_\_\_\_\_ to participate in the PSSA Netball Knockout Game against Bermagui Public School at Bermagui Country Club on **Tuesday, June 22<sup>nd</sup> 2021**.

□ I understand that travel to and from the game in Bermagui is via private transport.

□ I understand that by following the Department's COVID safety requirements, no student/parent should attend the venue if awaiting COVID test results, or if displaying flu-like symptoms.

Special needs of my child you should be aware of: \_\_\_\_\_

| Parent/ Caregiver Name: |                           | _ Signed: |
|-------------------------|---------------------------|-----------|
| Date:                   | Emergency Contact Number: |           |



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