BARRIER PSSA REPRESENTATION

This sheet provides information relevant to your child's intention to represent Barrier PSSA. You will need to:

- * read this sheet carefully
- * complete all sections of the accompanying form
- * return it at the selection trials.



Your child may be asked to trial more than once in order for the team manager to make an informed judgement when selecting a team to represent at a NSWPSSA Carnival.

SELECTION

For your child to be considered for selection they must complete the form provided. Once selected, parents and child have made a commitment which they are obliged to fill. Withdrawal without a valid reason will result in a review of further participation in further Barrier teams and may see your child ineligible to represent Barrier PSSA for 12 months.

Selection in a Barrier team makes your child eligible for selection in the NSW team and the costs associated with it.

COST

Costs for each sport vary depending on the means of travel and the location of the state carnival. The Barrier PSSA assists parents in financing their child's representation by using green Guessing Competition tickets. These tickets are to the value of the player's carnival levy, and compulsory playing uniform and can be either sold or purchased by the family to assist in raising the money needed.

Money and tickets are to be returned to the team manager by the nominated date. Failure to pay levy and apparel costs before the carnival will result in your child being unable to take the field until payment is made.

TRAVEL

Barrier PSSA team members will need to be able to find their own mode of travel to attend State Carnivals.

ACCOMMODATION

Parents will need to make accommodation arrangements for the duration of the State Carnival.

CONSENT FORM

If selected in a Barrier team, a consent form must be signed by parents and the student's principal endorsing the student to be a part of the team.

MEDICAL INFORMATION

If your child is selected to represent Barrier PSSA you will be required to complete a medical information form to assist the team manager in case of an emergency. This form must be returned to the team manager.

STATE CARNIVAL EXPECTATIONS

The child will be available for any requests from the team manager such as attendance at training or social functions for the team. The child will be under the direct control of the team manager in all matters relating to the conduct of the team and the carnival.

CODE OF CONDUCT

All selected players and caregivers will need to sign a Code of Conduct, outlining behavioural expectations while representing Barrier PSSA.



BARRIER PSSA REPRESENTATION

Parents are required to complete all sections of the form, sign and bring with them to trial. **NO NOTE NO TRIAL**



Broken	Hill	Trial/s	Inform	ation	Sport:	Australian	Footba
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Manager: Garry Jones (Burke Ward Public) Coach: Bill Shipway (Broken Hill Public)

Date & Time/s: Tuesday 25th February at 4pm

Venue: Picton Oval, Broken Hill

PERSONAL DETAILS							
Child's Name:							
	:						
	Email:						
Date of Birth:	School:						
CARNIVAL DETAILS							
The State PSSA AFL Car	rnival will be held at: Byron Bay, NSW						
The carnival dates are: Tuesday 19 th May – Thursday 21 st May							
COST – Team Member	Levy, Playing Uniform						
The approximate cost wil	ll be: approximately \$250						
TRAVEL AND ACCOM	MMODATION						
Carnival. Members select	rs selected in a Barrier Team must find their own transport to and from the State ted must source their own accommodation for the duration of the State Carnival. on costs are at the cost of the family and green raffle tickets will not be supplied to						
I have read the information	sheet and have completed details on the above form.						
By trialling for selection I	understand I am saying my child will be available to participate in the State Carnival and						
that withdrawal from the te	eam without a valid reason may result in my child being ineligible to represent Barrier						
PSSA for 12 months. I und	lerstand that if selected, I will be required to sign a consent form and have my child's						
principal sign to authorise	this selection in the Barrier Team.						
Signed:	(parent / caregiver)						