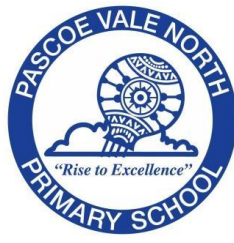


Coburg District Cross Country



26/04/2024

Dear Parents/Guardians,

Your child has successfully qualified for the Coburg District Cross Country Championships.

The Annual SSV Coburg District Cross Country Championships is to be held at Jackson Reserve, Coburg (Coburg Athletics Track) on Wednesday 15th May 2024, commencing at 9.45a.m. and concluding by 12.15pm (Back-up day: Wednesday 22nd May 2023).

Events will be conducted for boys and girls in the 10, 11 and 12/13 year age groups. The 10 year-old boys and girls run 2km. The 11 and 12/13 year-old boys and girls run 3km. Age groups are determined as of 31st December in the year of competition. Therefore, whatever age the student is turning this year or has turned this year, will be the age of which he/she competes.

Each event commences at the track, continues into nearby parkland and concludes back at the track.

Students are required to wear their school uniform, appropriate running shoes (Spiked footwear, football boots and other cleated footwear are not permitted), snack and a water bottle.

We depart from school at 9.00 am and return by 12.45 p.m. The races are from 9.45 a.m. to 12.15 p.m. **Parents are welcome to attend the day.**

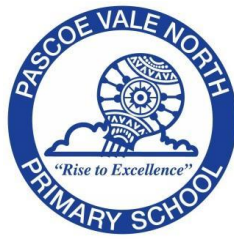
Permission notes are to be returned signed to Mr Rees no later than Friday May 10th, 2024. \$12 for the bus must be given to your classroom teacher – you may pay by C.S.E.F, EFPOS, Qkr or Cash.

Late money and notes may not be accepted, and emergencies could be chosen as replacements.

If you have any further queries, please do not hesitate to ask.

Yours Sincerely,

Barry Rees
Sport and PE Co-ordinator



STUDENT'S NAME : _____

STUDENT'S GRADE: _____

STUDENTS DATE OF BIRTH **DD/MM/YYYY**: _____

PASCOE VALE NORTH PRIMARY SCHOOL

I give permission for my child to participate in the Coburg District Cross Country as indicated and agree to pay to cover the cost of the bus.

Where the teacher in charge is unable to contact me, or it is otherwise impracticable to contact me, I authorize the teacher in charge to:-

- ◆ Consent to my child's receiving such medical or surgical treatment as may be deemed necessary by a medical practitioner
- ◆ Administer such first-aid as the teacher in charge may judge to be reasonably necessary

I wish to use my CSEF payment to cover the cost of the bus. Please contact Amy in the office to see if you have funds available before ticking this box.

EFTPOS/CASH

Qkr payment ref no:.....

Signature of Parent / Guardian..... Date.....

Best Contact Number
