Dear Parents/Carers

During Terms 2-4 in 2016 your son/daughter will be actively involved in the College’s Tuesday Sport and/or the MISA (Macarthur Independent Schools Association) Representative Sport Program. These programs will work on a rotation system 2016; this is compulsory for all students.

There are two avenues available for your son/daughter during their participation in the College’s Tuesday Sports Program. If they wish they are able to nominate to participate in the MISA Representative Sports Program, which is run in conjunction with the College Sport program. Throughout the year, students will have the opportunity to trial for Representative Sport Teams and if selected, will play against other Catholic and Independent Schools within the MISA Association. Nominations for these teams will be advertised to students during homeroom. Information regarding MISA competition can be found below.

Please take time to read through the information provided to enable your son/daughter to participate in the Sport/Recreational Activities offered to the students each Tuesday. Please return to your Academic Care Tutor by Wednesday 6 April.

RECREATIONAL ACTIVITIES/VENUE INFORMATION: YEAR 8

<table>
<thead>
<tr>
<th>Sport/Activity</th>
<th>Description</th>
<th>Venue Details</th>
<th>Transport</th>
<th>Equipment</th>
</tr>
</thead>
<tbody>
<tr>
<td>AFL Skills Program</td>
<td>Students will be given the opportunity to participate in AFL training sessions facilitated by qualified AFL coaches with the aim of developing AFL specific skills and general game play activities.</td>
<td>Kirkham Oval, Elderslie</td>
<td>Bus to venue</td>
<td>-College hat -water bottle -lunch -asthma puffer if required</td>
</tr>
<tr>
<td>Soccer Program</td>
<td>Students will participate in a soccer program run by the Western Sydney Wanderers Football Community. Content includes development of the fundamental skills associated with soccer.</td>
<td>Kirkham Oval, Elderslie</td>
<td>Bus to venue</td>
<td>-College hat -water bottle -lunch -asthma puffer if required</td>
</tr>
<tr>
<td>Netball</td>
<td>Students will participate in a netball clinic run by the Netball NSW development officers. The clinic will teach students about the rules and help develop the necessary skills required when playing netball.</td>
<td>College</td>
<td>N/A</td>
<td>-College hat -water bottle -asthma puffer if required</td>
</tr>
<tr>
<td>Taekwondo</td>
<td>A qualified Taekwondo instructor will use Hwarangdo as a way to build respect, courtesy, self-control, and improve self-discipline and confidence. Students will also be tested physically as this program targets an improvement in cardiovascular fitness.</td>
<td>College</td>
<td>N/A</td>
<td>-College hat -water bottle -asthma puffer if required</td>
</tr>
</tbody>
</table>

MISA REPRESENTATIVE SPORT OPTIONS

<table>
<thead>
<tr>
<th>Term</th>
<th>Sport</th>
<th>Division</th>
<th>Gender</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>Soccer</td>
<td>Years 8-9</td>
<td>Male</td>
</tr>
<tr>
<td>3</td>
<td>Netball</td>
<td>Year 8</td>
<td>Female</td>
</tr>
<tr>
<td>3</td>
<td>Soccer</td>
<td>Years 7-9</td>
<td>Female</td>
</tr>
<tr>
<td>4</td>
<td>Oztag</td>
<td>Years 7-9</td>
<td>Male and Female</td>
</tr>
</tbody>
</table>

*An additional note will be sent home to inform you if your child has been selected in a MISA Representative team.*
TUESDAY SPORT
PERMISSION AND MEDICAL INFORMATION RETURN SLIP

Please note it is important for the school to have accurate up-to-date medical information for students. Please complete the section below and keep staff up-to-date of any changes throughout the year.

STUDENT'S NAME: ________________________________________________________

HOUSE: (please circle) Polding Ingham Dharawal

Student Medical Information:
________________________________________________________________________________________________
________________________________________________________________________________________________

Does your child require an asthma puffer during sport time? YES □ NO □

*If yes they MUST have it every week otherwise they will not be permitted to participate.

Pre-existing Injuries:
________________________________________________________________________________________________
________________________________________________________________________________________________

Additional Information/concerns:
________________________________________________________________________________________________
________________________________________________________________________________________________

Parent/Guardian name (please print): ________________________________________________________

Parent/Guardian emergency contact number: ______________________________________

I give my permission for my son/daughter, ______________________________, to participate in the offered sports and activities on a Tuesday afternoon for 2016. I give permission for my son/daughter to travel to and from the sporting activities in the transport organised by the school. (Buses and walking accompanied by St Benedict staff)

I also give permission for the teacher in charge to seek medical assistance should it be necessary. If emergency contacts are not available, an ambulance may be called.

I understand that my son/daughter must have all necessary equipment, including a College hat, for Sport every Tuesday. I also understand exemplary behaviour is required by my son/daughter whilst participating in sport and physical activity opportunities. Unacceptable behaviour or attire may result in lunchtime detention and permission to attend Tuesday afternoon sport being withdrawn.

__________________________________ **_____________________
(Parent/Guardian's signature) Date