



# ST JOSEPH'S CATHOLIC HIGH SCHOOL

16 Macquarie St, Albion Park NSW 2527  
PO Box 130, Albion Park NSW 2527  
Tel: (02) 4230 8500  
Fax: (02) 4256 5793  
Email: [info@sjchsdown.catholic.edu.au](mailto:info@sjchsdown.catholic.edu.au)

27 July 2017

Dear Parent/Guardian

## Open Hockey Carnival 2017

Your child has been selected to represent St Joseph's Catholic High School in the Open Hockey Carnival. Details are as follows:

- Venue:** Narellan Hockey Fields  
(Narellan Fields Lot 1 Millwood Avenue, Narellan)
- Date:** Wednesday 23<sup>rd</sup> August, 2017
- Time:** Bus will depart from Church Street at 6:30 am sharp. Students are requested to arrive by 6:20 am. Games will commence from 8:20am and conclude by 3:10 pm. Estimated home arrival time of 5:30pm.
- Transport:** Bus
- Cost:** \$30.00 per student to cover entry fee and transport costs.
- Uniform:** Players are to wear sports uniform. All field players must wear shin pads and a mouth guard. Teams must have a fully protected goalkeeper in order to take the field. Players are responsible for all protective clothing eg: footwear, mouth guard, headgear etc. as well as a drink bottle for use during games.
- Canteen:** As it has not been communicated whether or not there will be a canteen on the day, students are asked to bring their own food and drink requirements for the whole day.
- Payment:** ***Online payment is our preferred payment method for this activity.*** Go to the school website [www.sjchsdown.catholic.edu.au](http://www.sjchsdown.catholic.edu.au) Homepage, Student Life, Permission Notes and Payments and select the relevant activity. This link closes at 3:30 pm on the final day of payment. Alternatively, payment can be made at the front office via Cash or Eftpos.

**In the instance of a cancellation students will be expected to attend school as normal.**

Parents are most cordially invited to attend the day.

Final day for payment for this event is Wednesday 16<sup>th</sup> August, 2017.  
Notes and payments received after this date will not be accepted.

If you have any questions regarding this excursion, please do not hesitate to contact the School on 4230 8500.

Sincerely

Mr Zac Ellul  
Acting Sports Coordinator

## Open Hockey Carnival 2017

To be returned by Wednesday 16<sup>th</sup> August, 2017

Please note the Excursion Policy states that the permission note and money must be returned by the due date or the student will not be able to participate.

**Teachers:** *Mr Armstrong and Mrs Davis*  
**Event:** *Open Hockey Carnival*  
**Date:** *Wednesday 23<sup>rd</sup> August, 2017*

I give permission for my child \_\_\_\_\_ of Homeroom \_\_\_\_\_ to represent St Joseph's in the Open Hockey Carnival at Narellan Hockey Fields, Narellan on Wednesday 23<sup>rd</sup> August, 2017.

I understand that students will be travelling to and from the venue by bus.

My child has had a history of the following medical conditions/injuries:

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The cost of this event is \$30.00

Please indicate payment method:

Payment enclosed \$ \_\_\_\_\_

Online payment receipt no: \_\_\_\_\_

(or receipt attached)

Final day for payment for this event is Wednesday 16<sup>th</sup> August, 2017.  
Notes and payments received after this date will not be accepted.

Parent Name (please print): \_\_\_\_\_

Parent Signature: \_\_\_\_\_

Daytime Contact Number: \_\_\_\_\_

Date: \_\_\_\_\_