



Gilgandra Public School

Honesty & Courtesy



Safe, Respectful, Learners

Principal
Patricia Howard

P.O Box 19
Gilgandra NSW 2827
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Tel: 02 6847-2043
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7th September 2022

John Moriarty Football Foundation – Primary Gala Day

Dear Parents/Carers,

Your child has been selected to represent Gilgandra Public School at the John Moriarty Football Federation Gala Day. They have been chosen by their classroom teacher for displaying the John Moriarty core values of *resilience, teamwork, leadership, kindness and respect*.

The Gala Day will be a round robin event with other schools who participate in the John Moriarty Football program. Although there will be finals at the end of the day, our focus is for the students to have fun and try their best. Mr Smithers and Ms Edwards will supervise students on the day.

When: 9:30am on Tuesday 13th September 2022. The bus will be leaving the school at 8:45am.

Where: Hans Claven Oval, Dubbo

Cost: Free

Food: John Moriarty will be providing fruit and a healthy lunch. Students may want to pack an extra snack.

Water: Students need to provide their own water bottles. There will be a water station available. However, it is recommended that student bring their own supply for the day.

Uniform: Students must wear their full school sports uniform, including shoes suitable for running. Students can also bring specialist soccer equipment if they have it – studded boots, shin pads, goalie gloves etc.

Transport: The school is taking the Youth Centre Bus to the Gala Day. However, the bus can only fit 10 students, which means that a few students will need to make travel arrangements. The school office will make phone calls over the coming days to discuss plans.

Please fill out the attached permission note and return it to the school office by Friday.

Adam Smithers
Sports Coordinator
Gilgandra Public School



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John Moriarty Football Foundation – Primary Gala Day

I give permission for my child to participate in the John Moriarty Football Foundation Primary Gala Day on Tuesday 13 September 2022.

In case of emergency, I give permission for my child to be transported, by ambulance if necessary, to the nearest hospital for assessment and treatment.

Signed:
Parent/Carer

Date:.....

Medical Details

Childs Name:.....

Emergency Contact:.....

Medicare Card Number:.....

Phone Number:.....

Health Fund:.....

Membership Number:

Medical Conditions - Please tick those that apply to your child and give details and dosage of any medication given.

Asthma:
.....

Allergies
.....

Other:
.....



Name of Family Doctor:

Phone: