



📄 Online Form - Tennis School Sport Program Term 4

Activity Name:	Tennis School Sport Program Term 4
Date/Time:	Friday 18 October 2024 12:30pm - 3:15pm (each Friday until 6 Dec)
Description:	<p>In Term 4, Grays Point Public School will once again offer tennis as part of the school sport program. The program will take place at Matchpoint Tennis Centre, Kirrawee. It will coincide with PSSA and run each Friday beginning on 18 October (Term 4 Week 1) and will include 8 rounds, concluding on Friday 6 December (Term 4 Week 8). We will depart school at 12.30pm and return by 2.30pm.</p> <p>All equipment (tennis racquets and balls) will be provided by the centre. Students can bring their own racquets. The program will involve a mixture of professional coaching and teacher supervised sessions. Coaching sessions include working on movement (speed and agility), balance, control, accuracy, timing and hand-eye coordination with racquets and balls. Additionally, the introduction of basic to complex stroke work, including volley, forehand, backhand and serve are provided for advanced students. Students rotate between coaching sessions and teacher supervised sessions.</p> <p>The program will run for one hour each Friday. Students will be transported to and from the venue by bus. The cost per student will be \$14.50 per week. This cost covers court hire, coaching and transport. Students will be invoiced in 2 parts to allow for wet weather cancellation. The first invoice will be for 5 weeks at a cost of \$72.50. The balance will be invoiced in Week 9 of Term 4.</p> <p>We are looking forward to an enjoyable term of tennis!</p>
Cost:	\$72.50
Venue:	Matchpoint Tennis (2 Singleton Place, Kirrawee NSW 2232)
Transport:	Bus to and from venue
Dress Code:	Full sports uniform
Due Date:	Thursday 17 October 2024

* indicates a required field

I have read the above details and give consent for my child, to attend the Tennis School Sport Program Term 4 *

☐ Yes ☐ No

Student Name:

Parent/Carer Name: *

Parent/Carer Phone Number: *

Emergency Contact Name: *

Emergency Contact Phone Number: *

Medical conditions/information relevant to the activity (including any medication required):

Medical Assistance - in the event of injury or illness, I authorise on my behalf the seeking of such medical assistance that my child may require: *

☐ Yes

Personal Injury - I understand that, in the event of injury, no personal injury insurance cover is provided by the NSW Department of Education for students in relation to school sporting activities, physical education lessons or any other school activity: *

☐ Yes

Concussion - if my child is diagnosed with concussion at any time, I must inform the school in writing and provide a medical clearance to support their return to sport and physical activity. If my child experiences a suspected concussion during school, they will be removed from this activity and medical follow-up recommended: *

☐ Yes

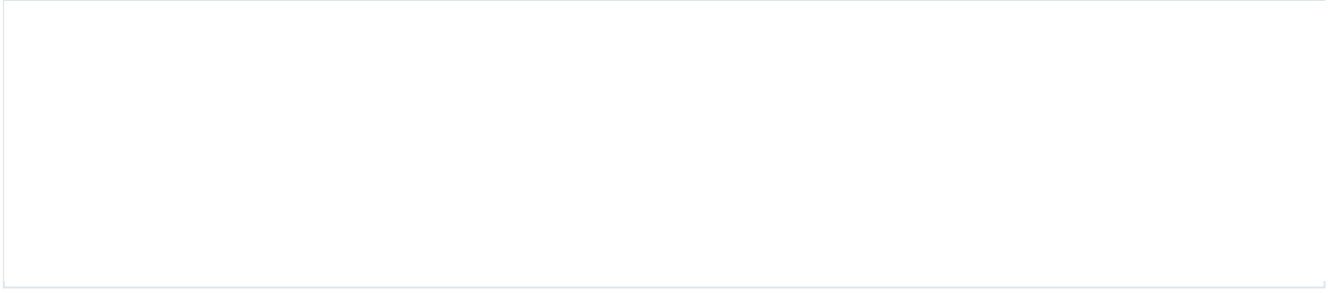
Illness - I confirm my child will not attend if displaying symptoms of illness, and/or directed to isolate under public health orders: *

☐ Yes

Behaviour - I acknowledge that if my child seriously contravenes behaviour expectation, they may be immediately excluded from this activity: *

☐ Yes

Parent/Carer Signature: *



Please note: Once you have submitted this consent form, payment can be made via the 'Make Online Payment' button located on this page.