

Glenwood High School

Innovation Opportunity Diversity Success

Round 1 Bill Turner Cup T	ournoment	Maximu		
	Maximum # of 16 students:		16	
Soccer/ School Represent	Grade:	9-12		
Glenwood Reserve	Date:	7 April 2022		
2:10PM	Release time:	4:15PM		
Glenwood High School	Students will be dismissed from:	Glenwood Reserve		
Own transportation		·		
School Sports Uniform, Black shorts, Black socks				
\$5 cash for referee	Payment due by:			
Kristopher Vlismas				
	Glenwood Reserve 2:10PM Glenwood High School Own transportation School Sports Uniform, Bla \$5 cash for referee	Glenwood ReserveDate:2:10PMRelease time:Glenwood High SchoolStudents will be dismissed from:Own transportationOwn transportationSchool Sports Uniform, Black shorts, Black socks\$5 cash for refereePayment due by:	Glenwood ReserveDate:7 April 202:10PMRelease time:4:15PMGlenwood High SchoolStudents will be dismissed from:GlenwoodOwn transportationSchool Sports Uniform, Black shorts, Black socks\$5 cash for referee\$5 cash for refereePayment due by:Image: Constraint of the sock sock sock sock sock sock sock sock	Glenwood Reserve Date: 7 April 2022 2:10PM Release time: 4:15PM Glenwood High School Students will be dismissed from: Glenwood Reserve Own transportation School Sports Uniform, Black shorts, Black socks \$5 cash for referee \$5 cash for referee Payment due by: Image: Control of the state

Dear Parent/Carer,

Your son/ daughter has been selected to represent Glenwood High School in the **U15 Bill Turner Cup Tournament**. Please see the above table for information regarding the competition. Students will need to be dressed in full sports uniform.

Due to not being financially feasible to organise transport, students are to make their own way to and from the venue. A staff member will meet the students at the venue and will be dismissed from the venue at the time stated above.

Steven Fenech Deputy Principal Sheridan Southall Head Teacher PDHPE

EXCURSION TO Glenwood Reserve PERMISSION NOTE / MEDICAL INFORMATION							
I do / do not consent to my child	participating in an excursion to						
Glenwood Reserve	on	7 April 2	022				
I understand and agree to the requirements and arrangements as stated on the excursion note.							
Special needs, allergies or medical condition/s that the school should be aware of:							
Has the school been provided with an individual health plan or emergency response plan for this condition? YES / NO							
I give / do not give permission for my child to receive medical treatment in case of emergency.							
Medicare No:	Expiry Date	:		Card Reference No:			
Parent/carer's signature:			Date: .				
Parent/carer's email:			Phone	number:			