

NARRABRI AND DISTRICT P.S.S.A ZONE

PERMISSION TO PLAY RUGBY LEAGUE OR RUGBY UNION

RUGBY LEAGUE / UNION

Details of Coaches

Table with 2 columns: NAME OF COACH, QUALIFICATIONS & EXPERIENCE. It contains four empty rows for data entry.

The Sports Organiser,
North West Area P.S.S.A.

I give permission for my child or ward
(Full name)

to play Rugby League / Rugby Union as part of the sport program of the Department of School Education and the North West Area P.S.S.A. I understand that this will involve participation in representative trials and/or games.

While I appreciate the efforts made by the Department of School Education and the North West Area P.S.S.A. to minimise the possibility of injury, I understand that there will remain some degree of risk inherent in participation in what is essentially a body contact sport. I understand that the wearing of a correctly fitted mouthguard is encouraged in all games and training sessions.

I am aware of the position that my child will be playing and certify that they have had adequate specific training and experience appropriate to that position. Under no circumstances should my child be allowed to play in the following positions:

Four sets of horizontal dotted lines for listing specific playing positions.

Parent or Caregiver's Name:
(Please Print)

Signed:

Date: / /