



**Glenmore State High School**  
Farm Street, North Rockhampton 4701  
Box 5822, Red Hill, North Rockhampton 4701

E. [the.principal@glenmoreshs.eq.edu.au](mailto:the.principal@glenmoreshs.eq.edu.au)  
P. (07) 4923 0333 F. (07) 4923 0300  
[www.glenmoreshs.eq.edu.au](http://www.glenmoreshs.eq.edu.au)

The Glenmore High Dragon symbolises strength, courage and endurance together with good fortune and success

## Parent and Caregiver INFORMATION FORM

**Please keep this page**

|                        |                                                                                                                                                                                                 |
|------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Description            | <b>Interschool Boys Basketball 2025</b>                                                                                                                                                         |
| Subject Area           | Extracurricular Sport                                                                                                                                                                           |
| Cost to Students       | \$10 per Player                                                                                                                                                                                 |
| Date                   | Tuesday afternoons<br>29 April – 3 June Finals 10 June                                                                                                                                          |
| Year Level             | Junior yrs 7 – 9 Seniors yrs 10 - 12                                                                                                                                                            |
| Location               | Homes games – Glenmore SHS<br>Away games – Other local secondary schools                                                                                                                        |
| Transport Arrangements | Private / Students own transport                                                                                                                                                                |
| Teacher/s in Charge    | Team Coach -                                                                                                                                                                                    |
| Accommodation          | N/A                                                                                                                                                                                             |
| Time of Departure      | N/A                                                                                                                                                                                             |
| Time of Return         | N/A                                                                                                                                                                                             |
| Eating Arrangements    | N/A                                                                                                                                                                                             |
| Dress                  | Students will be provided with playing jerseys for games.<br><br><b>If students do not have suitable equipment or playing apparel, they may be unable to participate in the selected sport.</b> |
| Additional Information | A draw of games will be provided to students when it is released.<br><br>All students can check the Sports Noticeboard outside Student Services at any time for more information.               |

- Students CANNOT train or play until the attached consent form has been completed and returned with payment to the school office.
- Issued Jerseys are to be washed and returned to Mrs Fairley within 2 weeks of competition completion.

For updates, please check the Glenmore SHS Facebook page or school Website. If you have any further questions, please email me at [tfair52@eq.edu.au](mailto:tfair52@eq.edu.au).

Kind Regards,

Tammy Fairley  
Sports Coordinator

Brendan Shannon  
Principal



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### **Sporting Code of Conduct**

#### ***Players***

- Play by the rules.
- Never argue with an official – if you need clarification, have your captain, coach or manager approach the official during a break or after the competition.
- Work hard for yourself and your team – while encouraging your teammates to do their best.
- Be a good sport – applaud all good plays whether they are made by your team or opposition.
- Show respect to and acknowledge opponents and officials. For example, shake hands before and after the game and say things like 'good luck', 'congratulations', and 'thanks ref'.
- Honour the team bench, it is for players and the coach and coaching assistants
- Cooperate with your coach, teammates and opponents – without them there would be no competition.
- Participate for your own enjoyment and benefit – not just to please parents and coaches.
- Play fair – no verbal abuse of officials, sledging other players or deliberately distracting or provoking an opponent.
- Respect the rights, dignity and worth of all participants - regardless of their gender, ability, culture or religion.
- Do not expect or accept "special" favours from a coach or person involved in team or club management.
- Speak to an adult you trust if you have an issue, feel unsafe or are concerned about someone else.
- Remember that school rules still apply.

#### ***Parents and Spectators***

- Remember that children participate in sport for their enjoyment, not yours.
- Encourage children to participate, do not force them.
- Focus on your child's efforts and performance rather than whether they win or lose.
- Encourage children to play according to the rules and to settle disagreements without resorting to hostility or violence.
- Honour the team bench, it is for players and the coach and coaching assistants
- Never ridicule or yell at a child for making a mistake or losing a competition.
- Remember that children learn best by example. Appreciate good performance and skilful plays by all participants.
- Respect officials' decisions and teach children to do likewise.
- Show appreciation to volunteer coaches, officials and administrators. Without them, your child could not participate.
- Respect the rights, dignity and worth of every young person regardless of their gender, ability, cultural background or religion.
- Remember these are school-organised events and the school rules still apply.

Please take time to read and acknowledge the above Code of Conduct – it applies to our players, parents, spectators, team coaches, managers, and assistants. It is a responsibility for all of us to ensure that the sporting ground is a positive, safe, and beneficial place for our students.

Kind Regards,

Tammy Fairley  
Sports Coordinator



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OFFICE  
USE

Date Paid  
\_\_\_\_ / \_\_\_\_ / 2025  
Receipt Number  
\_\_\_\_\_

**COACH:**

## CONSENT FORM

***Please return this page with payment to the school office***

|                       |                                    |
|-----------------------|------------------------------------|
| <b>Activity</b>       | <b>Interschool Boys Basketball</b> |
| <b>Cost</b>           | <b>\$10 per player</b>             |
| <b>Payment due by</b> | <b>Friday 21 March 2025</b>        |

As parent/guardian of the student mentioned below, I give my consent for him/her to participate in the identified activity and agree to delegate my authority to the teacher/s involved. I understand teachers will provide supervision, and may take whatever disciplinary action they deem necessary to ensure the safety, wellbeing and successful conduct of the students at the outlined activity. I have also read, understood, and agree to abide by the attached Code of Conduct.

I understand that transport to and from the event is my responsibility and that the arrival and departure arrangements are also responsibility of the parent/caregivers unless otherwise specified.

In the event of any accident or illness, I authorise the obtaining on my behalf, an ambulance or any medical assistance that my child may require. I accept full responsibility for all expenses incurred and will seek to reimburse Education Queensland in that event. I submit the following true medical information about my child and include details of limitation which he/she has for the activity concerned.

I understand that mouth protection is mandatory in the following sports: AFL, Rugby League, Rugby Union, Water Polo and Hockey. I have read the information provided to me about mouth protection and accept responsibility for the type of mouth protection my child will wear whilst playing this sport.

### Medical Information

**Student Name:** \_\_\_\_\_ **Year:** \_\_\_\_ **Date of Birth:** \_\_\_\_\_

Is there any medical or psychological reason to prevent your child from participating in any of the activities outlined on the information form? **Yes / No**

**If yes, please provide details:** \_\_\_\_\_

Please indicate ✓ if your student suffers from any of the following and give full details in the space provided. These details are kept confidentially.

|                                          |  |                      |  |                             |          |
|------------------------------------------|--|----------------------|--|-----------------------------|----------|
| Allergies                                |  | Heart Problems       |  | Medication Required         | Yes / No |
| Asthma                                   |  | Excretory problems   |  | Recent Operations           | Yes / No |
| Blood Pressure                           |  | Respiratory Problems |  | Immunisations Current       | Yes / No |
| Epilepsy                                 |  | Travel Sickness      |  |                             |          |
| Drug Reaction<br>E.g. Penicillin Allergy |  | Other:               |  | Ear/Nose/Throat<br>Problems | Yes / No |

**Medical Details (including current medication):** \_\_\_\_\_

**Emergency Contact Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

I have read the above information and understand all that I am consenting to, and I hereby give permission for my child to attend the indicated activity.

**Parent/Guardian Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**ISSUED JERSEY #:**

