

Sample Permission Note – Leading with Action Day

SCHOOL LETTERHEAD

NSW Premier’s Sporting Challenge *Leading with Action Day* & Collected Student Information

Dear Parents/Caregivers,

As part of our school’s ongoing commitment to the NSW Premier’s Sporting Challenge (PSC) Sport Leadership Program, students in **(Year group involved)** are invited to attend the *Leading with Action* day on **(date of event)** which is being held at **(name of venue)**.

The *Leading with Action* program provides students with the opportunity to attend three sport-specific workshops of 90 minutes each. The workshops are designed to introduce each specific sport at a beginner coach level with the intention that during the following year these students will deliver sports sessions to students from partner primary schools at the *PSC Learning to Lead Day*.

The PSC has worked in partnership with NSW Sports Associations to deliver these workshops. On the day students may be asked to provide their Date of Birth (DOB) and email address as a record of their attendance for their workshop accreditation. The NSW Sports Associations have agreed to use this information solely for the purpose of sport accreditation and comply with sections 8 to 19 of the *Privacy and Personal Information Act 1998*. The following registered NSW Sports Associations attending your child’s *Leading with Action* day will be: **(delete/add where applicable to your PSC LwA)**

- NSW Rugby League
- Jack Newton Golf Foundation
- Cricket NSW
- Brumbies Rugby
- Tennis NSW
- Netball NSW
- Softball NSW
- AFL NSW
- Football NSW
- Softball NSW
- Lacrosse NSW
- Gymnastics NSW
- New England Mountain Bike Riding
- Hornsby Basketball Association
- Touch Football NSW

If you wish to be informed about the information your child has supplied to the database please contact the NSW School Sport Unit at schoolsportsunit@det.nsw.edu.au.

(Insert PSC Sport Leadership Manager Name)

(Insert School Principal Name)

PSC *Leading with Action Day* Permission note

I give permission for my child _____ to attend the PSC *Leading with Action Day* being held at **(insert venue)** on **(insert date)**.

I give permission for my child to provide their DOB and email contact and I understand this information is being used solely for the purpose directly related to their participation on the day.

Signed: _____ Parent/Caregiver Date: _____