

Grow in Grace and Knowledge

Monday 4th November 2024

### **Zone 20/20 Cricket Tournament (Lismore)**

Wednesday 20th November 2024

Dear Parents/Guardians,

What:

Your child has been selected for the Zone 20/20 Cricket Tournament in Lismore. We will be sending 1 team to participate in this event. Teams will play 2 games throughout the day. The first game will be 8.30am to 11.30am and the second game will be 12.00pm to 3.00pm.

This game will involve using a cricket ball and all the necessary safety equipment will be worn by students when they are batting and fielding in certain locations.

When:

Leaving from Casino Presbyterian Church at <u>7.15am</u> on Wednesday 22<sup>nd</sup> November and returning to Casino Presbyterian Church by <u>4.15pm</u> the same day.

Where:

Jim Roder Oval and Barry Davidson Oval, Brewster Street, Lismore (not far from Lismore Mcdonalds).

Cost:

The cost will be **\$23** for players' fees and transport. Lunch is not supplied in the cost. If your child does not get on the bus and instead travels to Lismore another way, they will still have to pay the full amount for this excursion. Even though McDonalds is available, please ensure your child has enough water / food to get them through the day (that includes a solid breakfast) just in case we don't have time to go across to Mcdionalds between games.

# What to bring

- Sports Uniform, hat and water
- Bring your own cricket gear if you don't want to use the schools gear
- Sunscreen, medications, asthma, etc
- Wear two (2) pairs of underpants so you can place the box between both pairs (unless you bring your own box).
- Students can bring mobile phones but they must be turned off in their bags and only used to communicate if we are running later at the end of the day.

Please read the above details carefully and if your child is able to represent the school at zone cricket could you please fill out the attached permission slip and return it with the money (\$23) <u>TO THE OFFICE</u> by <u>Thursday 14<sup>th</sup> November 2024.</u>

D. McPherson **Sports Coordinator** 



Grow in Grace and Knowledge

Phone 02 6662 5599 Fax 02 6662 5584

Email admin@ccs.nsw.edu.au Web www.ccs.nsw.edu.au PO Box 30 Casino NSW 2470 93 Manifold Road North Casino ABN 93 392 520 152 Office Hours Mon-Fri 8.30am - 4.00pm



Grow in Grase and Knowledge

Monday 4th November 2024

### **Zone 20/20 Cricket Tournament (Lismore)**

#### Wednesday 20th November 2024

I give permission for my child	to participate in the Zone 20/20 Cricket						
Tournament on Wednesday 20th November, 2024.	Should any medical or hospital treatment be required for						
my child, I authorise the teacher in charge to take the appropriate action and any associated costs will be							
met by me. Special needs (e.g. medication and alle	rgies) for the teachers to be aware of:						
	······						
TRAVEL ARRANGEMENTS (who are tight the conti-	and that amply to your abild)						
TRAVEL ARRANGEMENTS (please tick the option	ons that apply to your child)						
My Chill will:							
travel on the bus from Casino Presbyterian Cho	urch at 7.15am						
meet at Jim Roder Oval, Brtewster Street, Lism	nore at 8.00am						
AND							
depart from Jim Roder Oval, Lismore at the end	d of the tournament						
travel on the bus to Casino Presbyterian Churc	h at the end of the tournamnent.						
My child will also walk home from Casino Presi	byterian Church when we return at 4.15pm						
Signed: (Parent/Guard	an)						
Print Name:	Date:						

PLEASE TURN THIS SHEET OVER TO SEE THE METHOD OF PAYMENT OPTIONS.



Grow in Grase and Knowledge

#### METHOD OF PAYMENT OPTIONS: ZONE 20/20 CRICKET (LISMORE)

STUDENT NAME:						
COST: \$23 per student (please pay by Thursday 14 <sup>th</sup> November, 2024).						
METHOD OF PAYMENT:	□ Cash	□ Cheque	□ Eftpos	□ Netbank	□ Credit Card	
DATE OF PAYMENT:			[THE DATE TI	HE EXCURSION	N WILL BE PAID]	
Online Payment (Netbank)	:					
Bank: National Australia Bank BSB No: 082 500				82 506		
Account Name: Casino Christian School		Account number: 828017136				
Please ensure that the refere	ence has yo	our FAMILY C	CODE & the NA	<b>ME</b> of the excur	sion.	
Credit Card Payment:						
Please Debit my (please circ	le):	Visa Card	MasterCard	I		
Expiry Date: /	CVV	:	For the	amount of:		
Cardholder's Name:			Signature: _			
D. McPherson						
Sports Coordinator						