



Evelyn  
Scott  
School

2 Bielski Street, Denman Prospect, ACT 2611

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## Jamie Pearlman and Sue Geh Cup

### DESCRIPTION:

The Kumon Sue Geh (Girls) & Jamie Pearlman Cup (Boys) are Basketball ACT's annual competitions open to all ACT primary schools. With boys and girls divisions played in North and South school conferences, the annual primary school competitions culminate in the best of each conference playing off in the finals. This year Evelyn Scott School will field a girls and Boys team into these competitions.

DATE:	Sue Geh Cup 5/6 (Girls) - <b>Thursday 31 Aug 2023</b> Jamie Pearlman 5/6 (Boys) - <b>Wednesday 06 Sep 2023</b>
VENUE:	<a href="#">Southern Cross Basketball Stadium, 7 Pitman St, Greenway ACT 2900</a>
TRAVEL ARRANGEMENTS:	Family to arrange transport for learners to and from the venue
DEPARTURE & RETURN TIMES:	Please arrive by 8:30 am Learners to be collected at 2:50 pm
COST:	\$20 per learner (payment details on following page)
CLASSES ATTENDING:	Selected 3/4 and 5/6 Learners
STAFF ATTENDING:	Dean Pilton
WHAT TO BRING:	Water bottle, lunch, snacks, appropriate basketball footwear
NOTE & PAYMENT DUE BY:	<b>Please return all notes and payment by Wednesday 24 August 2023</b> <i>Please note, we are unable to accept permission notes and payments after this date. Learners will be unable to attend the excursion without signed parent/carer permission.</i>

### Code of Conduct and Parental Agreements:

*Staff accompanying students on excursions will take all reasonable care while the students are in their charge to protect them from injury and to control and supervise their behaviour and activities. Unacceptable behaviour will be treated as it is normally treated at school, (reminders, time out in a designated spot, and exclusion from an activity) but with the additional factor that the student may be returned to school should the behaviour be extreme or overly persistent.*

*Parents should be aware that staff members are not responsible for injuries or damage to property which may occur on an excursion where, in all circumstances, staff have not been negligent. Parents should warn children of the risk to themselves, to others and to property, of impulsive, wilful or disobedient behaviour*

Kind regards,

Dean Pilton

[dean.pilton@ed.act.edu.au](mailto:dean.pilton@ed.act.edu.au)



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### Jamie Pearlman and Sue Geh Cup

STUDENT NAME: \_\_\_\_\_ CLASS: \_\_\_\_\_

I hereby consent to my child attending the above Evelyn Scott School excursion.

Please check the appropriate boxes:

☐ I have read and understand the attached information page for the event/excursion and I consent to the payment and travel arrangements.

☐ I agree to my child participating in the activities associated with this excursion mentioned previously. I have discussed with my child the need for expected behaviour on this excursion. I authorise the school to make arrangements for the welfare of my child (including medical or surgical treatment) in an emergency and I agree to meet the associated costs. I have provided to the school all medical information relevant to my child attending this excursion

☐ The [Medical Information and consent form](#) only needs to be completed once/year prior to the first excursion unless there are changes to the details on this form. Are there any changes to this form? Yes No

If yes, an updated Medical Information and Consent Form is required to be completed (available through the front office).

☐ Will your child require medication to be administered during the excursion (e.g. allergy medication, pain relief)?  
Yes No

If yes, please complete a [Medication Authorisation and Administration Record](#) (available through the front office).

☐ Is there any additional information you need to provide to support your child's participation in this excursion?  
Yes No

PARENT NAME: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_ CONTACT PHONE NUMBER: \_\_\_\_\_

### PAYMENT OPTIONS: Jamie Pearlman and Sue Geh Cup

• Pay via QuickWeb: <https://www.evelynscottschool.act.edu.au/Payment>

If paying via QuickWeb, please include the cost code: **5/6 Basketball Comp** as a reference for the excursion

• Pay over the phone by Credit Card/EFTPOS (call the front office on 6142 3491)

**Office Staff to complete:**

Received by: \_\_\_\_\_

Date: \_\_\_\_\_

Payment made via: \_\_\_\_\_ Entered on SAS: ☐