

# **BUNDABERG 10-12 YEARS** **SCHOOLS' REP RUGBY LEAGUE**

ATTENTION: Principals/Deputies/Rugby League  
Coaches/P.E. Teachers/Sports Co-Ordinators

## **2021 Trials for Bundaberg 10-12 Years Schoolboys' Representative Rugby League Teams**

**Felise Kaufusi (Melbourne Storm), Patty Kaufusi  
(Cowboys/Storm/Dragons) & Kyle Laybutt (NQ Cowboys)  
& other QLD Cup players all made their first ever Rep RL  
teams through this program!!!**

Please photocopy this invitation for students who wish to trial for our 2021 Bundaberg Schoolboy Representative RL teams. You can play both club and schoolboy rugby league if you choose to but you can only make Bundy rep (10,11,12 yrs), and Wide Bay and Queensland rep teams in the 11/12 age group through schoolboy rugby league.

Venue: Waves Sporting Complex (Thabeban Road)

Dates: Monday 15 March, Monday 22 March, Monday 29 March.

Times: 3.30 pm – 5.30 pm

Ages: 10 yrs (born 2011), 11 yrs (born 2010), 12 yrs (born 2009).  
Exceptional 9 year olds born 2012 may trial for the 10 yrs team.

**ALL PLAYERS MUST WEAR A MOUTHGUARD AT TRIALS/GAMES - NO  
EXCEPTIONS!!!**

-All players to bring a water bottle and training gear. If selected for Bundy, games will be held against: Rockhampton, Gladstone, Mackay (all in Rocky and in Bundaberg). Wide Bay Trials in Hervey Bay (u11s & u12s only) in Term 2. If you can't make it to the Bundy trials on any particular day (i.e. due to other rep sport) please turn up on the day(s) you are available.

-If selected for Wide Bay U11s, State Championships are in Townsville.

-If selected for Wide Bay U12s, the Queensland team trials are in Cairns.

-There will be one (1) Queensland U12 team selected this year to attend SSA National Championships in Perth.

-Teachers sending prospective players, please ensure they bring a teacher signed BDSSA nomination/medical form and players are of a standard to be considered to make a representative team. **NO TEACHER SIGNED FORM MEANS NOT ALLOWED TO TRIAL**

**-Boys who made the Bundy Schoolboy AFL Team are to attend AFL Training on Mon 15 March and then attend Bundy RL Trials on 22/29 March if trialling for both teams.**

Please forward any queries to Jason Shears (Secretary B 10-12 Yrs SRL), - Ph 0437534427.

B.P.S.S.

**BUNDABERG 12 YEARS AND UNDER SCHOOLS' SPORTS  
TRIALS**

SPORT: \_\_\_\_\_

***PLEASE COMPLETE THIS FORM AND PRESENT TO THE COACH/MANAGER AT THE  
TRIALS***

TRIAL DATES: \_\_\_\_\_

WHERE: \_\_\_\_\_

NAME: \_\_\_\_\_

SCHOOL: \_\_\_\_\_ SCHOOL PHONE: \_\_\_\_\_

NOMINATED BY (Teacher's Name): \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

EMERGENCY CONTACT/S:

1. \_\_\_\_\_ PHONE: \_\_\_\_\_  
2. \_\_\_\_\_ PHONE: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

ANY RELEVANT MEDICAL HISTORY: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

PREFERRED POSITION/S FOR SELECTION: (eg. Opening bat; First base; Goalie etc.)  
\_\_\_\_\_

- I acknowledge that the Bundaberg 12 Years and Under School Sport (as an operational unit of the Queensland Government, Department of Education and Training) does not have personal accident insurance cover for students and as such, will not accept financial liability for any Medical, Hospital or Dental expenses if they should arise.

YOUR SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

PARENT'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_



## MOUTHGUARD CONSENT FORM

The Department of Education Curriculum Activity Risk Assessment (CARA) guidelines mandate that **mouthguards are compulsory** for students wishing to participate in a school sport event for the sports listed below.

- Australian Football (AFL)
- Hockey
- Rugby League
- Water Polo
- Rugby Union

The Department of Education strongly recommends that students wear custom-fitted mouthguards. Parents / Carers are requested to refer to the Australian Dental Association website below in order to make an informed choice about the different types of available mouthguards.

<https://www.ada.org.au/Your-Dental-Health/Teens-12-17/Mouthguards>

If a student is unable to wear a mouthguard for medical reasons, then a signed medical clearance certificate is required prior to participating in the event.

Please complete the parent / carer consent permission section below and return this form to the relevant team official, along with all other required paperwork, **prior** to the event.

Failure to comply with this permission process will mean that the student will be unable to participate at the specific school sport event.

### STUDENT DETAILS

|                |  |
|----------------|--|
| Student's Name |  |
| Date of Birth  |  |
| School         |  |

### Parent / Carer Consent and Medical Declaration

I, \_\_\_\_\_ (name of parent) understand that mouth protection is mandatory in this sport. I have read the information provided to me about mouth protection and accept responsibility for the type of mouth protection I/my child will wear whilst playing this sport.

I confirm that the above mentioned student:

Please tick one of the boxes below

- ☐ has **NO** identified medical condition/s that may impact on their safety by wearing a mouthguard during participation in this sport.

OR

- ☐ has an identified medical condition/s that may impact on their safety during participation in this sport and therefore **cannot wear a mouthguard**. The required medical clearance certificate is attached.

Signature of Parent: \_\_\_\_\_

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