

Capricornia School Sport



Capricornia School Sport Department of Education PO Box 138 ROCKHAMPTON Q 4700

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FORM 6 - WITHDRAWAL

This form must be completed and forwarded to the Capricornia School Sports Office as soon as possible after the decision to withdraw is made. Failure to advise management before the date of close of return of personal particular forms etc., may incur a suspension for further participation in School Sport. If the withdrawal is before the close of acceptance, then the completion of Part C is optional. Part A and Part B must be completed and the signing at the bottom of the page must be completed.

		n the completion of Part C is option ge must be completed.	nal. Pa	art A and Part B must	be complete	ed and the signing at the	
Part A		Sporting Team & Age Group					
Surname				Given Name			
School				Date of Birth			
Part B							
Has your school been advised of withdrawal?				Who did you contact?			
□ Yes □ No				By: □ Email □ Phone			
Has your Team Manager been advised?							
□ Yes □ No				☐ Fax ☐ Word of Mouth			
Have you paid your levy?				□ Yes		□ No	
Have you collected your apparel?				□ Yes		□ No	
Have you previously applied for Travel Exemption?				□ Yes		□ No	
Part C							
My consideration to withdraw from the team was due to:							
□ Fin	Financial Difficulties			Excessive levy			
□ Inju	ury (ple	please specify)					
□ Att	ending	ding other sports trials (please specify)					
□ Im	portan	tant School Trip (please specify)					
□ Un	able to	able to accept travel arrangements (please specify)					
Oth	Other (please specify)						
Student Signature:				Parent Signature:			
Principal Name:			Principal Signature:				