

**Capricornia School Sport**

Capricornia School Sport PH: (07) 4932 4045

Department of Education ABN: 76 337 613 647

PO Box 138 Email: capsport@qed.qld.gov.au

ROCKHAMPTON QLD 4700 Website: [www.capsport.eq.edu.au](http://www.capsport.eq.edu.au)

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.

|  |  |  |
| --- | --- | --- |
| **Part A** | Sporting Team |  |
| Surname |  | Given Name |  |
| School |  | Date of Birth |  |

|  |
| --- |
| **Part B** |
| Has your school been advised of withdrawal? 🞏 Yes 🞏 No | Who did you contact?…………………………………………….By:🞏 Email🞏 Phone🞏 Fax🞏 Word of Mouth |
| Has your Team Manager been advised?🞏 Yes 🞏 No |
| 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: |
| 🞏 | Financial Difficulties | 🞏 | Excessive levy |
| 🞏 | Injury (please specify) |
| 🞏 | Attending other sports trials (please specify) |
| 🞏 | Important School Trip (please specify) |
| 🞏 | Unable to accept travel arrangements (please specify) |
| 🞏 | Other (please specify) |

Student Signature: Parent Signature:

Principal Name: Principal Signature: