Athletics Relay 

| Information required | Enter your details here | | | | Information required | Enter your details here |
| --- | --- | --- | --- | --- | --- | --- |
| Return completed form by email to uploaded to the [Regional Athletics 2024 Nominations Folder](https://schoolsnsw.sharepoint.com/:f:/s/NorthernRiversZonePrimarySchoolsSportsAssociation/EnSjqRz9_xlCmQl4U8WdBuMBmdz0ZPYb63loiQ2qOjxUQg?e=p6TrhK) in the Northern Rivers Teams Folder by Friday 30th August 2024. Your School/District Name needs to be in the subject title. | | | | | |
| Area | Northern Rivers | | | | |
| Event | Senior / Junior | | | | |
| Gender | Boys / Girls | | | | |
| Name of School |  | | | | |
| Number | Name | | | | Date of Birth |
| 1 |  | | | |  |
| 2 |  | | | |  |
| 3 |  | | | |  |
| 4 |  | | | |  |
| Reserve (if any) |  | | | |  |
| Information required | | Enter your details here | Information required | Enter your details here | |
| Principal/Sports Organiser Approval | |  | Date |  | |

**Please ensure the age of each athlete is correct**

| Area | Northern Rivers | | | | |
| --- | --- | --- | --- | --- | --- |
| Event | Senior / Junior | | | | |
| Gender | Boys / Girls | | | | |
| Name of School |  | | | | |
|  |  | | | | |
| Number | Name | | | | Date of Birth |
| 1 |  | | | |  |
| 2 |  | | | |  |
| 3 |  | | | |  |
| 4 |  | | | |  |
| Reserve (if any) |  | | | |  |
| Information required | | Enter your details here | Information required | Enter your details here | |
| Principal/Sports Organiser Approval | |  | Date |  | |

**Please ensure the age of each athlete is correct**

Small Schools Relay

Enrolment 26 – 54

This relay was formerly referred to as the PP5 Relay. At the State Athletics Carnival, it is now called **The Nigel Bagley Relay**.

The rules for this event are as follows:

The Nigel Bagley Relay must include students from schools with a total enrolment of more than 25 pupils but not exceeding 54 pupils. The combination of boys and girls in each team to be decided by the individual school **but** all children in the team **must** be enrolled at the same school

The classification of the enrolment will be determined by the February Staff Return.

| **Declaration**  This is to certify that I have read the rules and indicate that our School enrolment as per the February Staff Return complies with the guidelines for this event. | | | | | | |
| --- | --- | --- | --- | --- | --- | --- |
| Name of School | |  | | | | |
| Total School Enrolment (as at February staff Return) | |  | | | | |
| Signed | |  | | | | |
| Date | |  | | | | |
| Information required | Enter your details here | | | | | Information required | | Enter your details here |
|  |  | | | | |  | |  |
|  |  | | | | |  | |  |
| Return completed form by email to [Regional Athletics 2024 Nominations Folder](https://schoolsnsw.sharepoint.com/:f:/s/NorthernRiversZonePrimarySchoolsSportsAssociation/EnSjqRz9_xlCmQl4U8WdBuMBmdz0ZPYb63loiQ2qOjxUQg?e=p6TrhK) by Friday 30 August 2024 | | | | | | | |
| Area | Northern Rivers | | | | | | |
| Event | Senior / Junior | | | | | | |
| Gender | Boys / Girls | | | | | | |
| Name of School |  | | | | | | |
| Number | Name | | | | | Date of Birth | |
| 1 |  | | | | |  | |
| 2 |  | | | | |  | |
| 3 |  | | | | |  | |
| 4 |  | | | | |  | |
| Reserve (if any) |  | | | | |  | |
| Information required | | | Enter your details here | Information required | Enter your details here | | |
| Principal/Sports Organiser Approval | | |  | Date |  | | |

Small Schools Relay

Enrolment 1 - 25

This relay was formerly referred to as the PP6 Relay. At the State Athletics Carnival, it is now called **The Norm and Elizabeth Austen Trophy.**

The rules for this event are as follows:

The Norm and Elizabeth Austen Trophy must include students from schools with a total enrolment not exceeding 25 pupils. The combination of boys and girls in each team to be decided by the individual school **but** all children in the team **must** be enrolled at the same school

The classification of the enrolment will be determined by the February Staff Return.

| **Declaration**  This is to certify that I have read the rules and indicate that our School enrolment as per the February Staff Return complies with the guidelines for this event. | | | | | | |
| --- | --- | --- | --- | --- | --- | --- |
| Name of School | |  | | | | |
| Total School Enrolment (as at February staff Return) | |  | | | | |
| Signed | |  | | | | |
| Date | |  | | | | |
| Information required | Enter your details here | | | | | Information required | | Enter your details here |
|  |  | | | | |  | |  |
|  |  | | | | |  | |  |
| Return completed form by email to [Regional Athletics 2024 Nominations Folder](https://schoolsnsw.sharepoint.com/:f:/s/NorthernRiversZonePrimarySchoolsSportsAssociation/EnSjqRz9_xlCmQl4U8WdBuMBmdz0ZPYb63loiQ2qOjxUQg?e=p6TrhK) by Friday 30 August 2024 | | | | | | | |
| Area | Northern Rivers | | | | | | |
| Event | Senior / Junior | | | | | | |
| Gender | Boys / Girls | | | | | | |
| Name of School |  | | | | | | |
| Number | Name | | | | | Date of Birth | |
| 1 |  | | | | |  | |
| 2 |  | | | | |  | |
| 3 |  | | | | |  | |
| 4 |  | | | | |  | |
| Reserve (if any) |  | | | | |  | |
| Information required | | | Enter your details here | Information required | Enter your details here | | |
| Principal/Sports Organiser Approval | | |  | Date |  | | |

| 2024 Athletics Championships  Relay Teams  Please forward to North Coast School Sport Unit by **Friday 30 August 2024** | | |
| --- | --- | --- |
| Division | Sex | School |
| Junior | Boys |  |
| Junior | Boys |  |
| Junior | Boys |  |
| Senior | Boys |  |
| Senior | Boys |  |
| Senior | Boys |  |
| Junior | Girls |  |
| Junior | Girls |  |
| Junior | Girls |  |
| Senior | Girls |  |
| Senior | Girls |  |
| Senior | Girls |  |
| Nigel Bagley Relay | CoEd |  |
| Nigel Bagley Relay | CoEd |  |
| Nigel Bagley Relay | CoEd |  |
| Norm and Elizabeth Austen Trophy | CoEd |  |
| Norm and Elizabeth Austen Trophy | CoEd |  |
| Norm and Elizabeth Austen Trophy | CoEd |  |