

# Darwin Region

## Self Nomination 2026



### 12 Years & Under Tennis

**Ages 10 - 12 Primary & High School Students - Boys & Girls**

**Students born between 1<sup>st</sup> of July 2013 – 31<sup>st</sup> of December 2016.**

**Age dispensation applies for students born 1<sup>st</sup> July – 31<sup>st</sup> December 2013.**

To be eligible for selection in the Darwin Region Team students **MUST** email the nomination form to Darwin Region by the 1<sup>st</sup> April 2026, be the correct age and attend a Darwin Region School.

Please note: This is a self-nomination process for a development camp.

Once forms have been completed, please return to [darwinsport.doe@education.nt.gov.au](mailto:darwinsport.doe@education.nt.gov.au) by 1st April 2026.

<b>SCHOOL OF SPORT EDUCATION NT EVENT DETAILS</b>		
<b>Date</b>	<b>Venue</b>	<b>Levy Costs (ESTIMATE ONLY)</b>
16 <sup>th</sup> – 18 <sup>th</sup> June 2026	Darwin International Tennis Centre. Marrara	\$380

For any further questions please contact our office.

**Darwin Region Sport Education Pathways Coordinator**

Amanda Macpherson M: 0460 037 976 [darwinsport.doe@education.nt.gov](mailto:darwinsport.doe@education.nt.gov)

Please complete all details below and return to the Darwin Region Pathways Coordinator – [darwinsport.doe@education.nt.gov.au](mailto:darwinsport.doe@education.nt.gov.au) no later than 1/4/2026.

Failure to do so may result in your child being unable to participate in the activity.

#### Student details

Family name		Student's given name	
Date of birth		Age	
Gender	Male / Female / Other		
School			

**My Child is of Aboriginal or Torres Strait Islander origin. (please circle) YES/NO**

<u>Dietary restrictions</u>	
Known allergies  This may include drug reactions	
Does your child have a medical condition, physical or psychological limitations or cultural restrictions that need to be considered?	
If yes, please provide any other information you believe may help staff provide the best possible care, attaching information as necessary.	
Current medications  If applicable, list name of medications and include instructions.	

## Parent / Guardian Information

Parent's name		Preferred contact	Work/home/mobile phone
Mobile and home		Work	
Parent/ guardian email			
Emergency contact name		Preferred contact	Work/home/mobile phone
Mobile and home		Work	

## Parent consent

Your attention is drawn to the following important points:

- Students are under the teacher's or supervisor's authority for the duration of the excursion. A student may be returned home at the expense of the parent if the teacher or supervisor considers that circumstances warrant such action.
- The Department of Education has a duty of care for students engaged in school related activities, including excursions and sporting events under its direction or supervision. All reasonable steps will be taken to protect students against reasonably foreseeable risks of injury or harm.
- Financial responsibility for medical and other costs incurred in emergency situations

or where a decision is taken to return a student home, rests with the parent of the student. Parents may wish to take out additional insurance to cover such costs.

- Liability for loss, theft or damage to student property is the responsibility of the parent of the student.
- Students are not permitted to transport other students in vehicles regardless of written permission being provided.
- The parent is responsible for informing the school or preschool of any change in consent to their child attending an excursion and of any changes to student medical details.

Permission is given for my child to attend this excursion.	Yes	No	
Permission is given for school staff to administer first aid to my child if required.	Yes	No	
Permission is given to secure medical attention in case of illness or accident whilst on this excursion and I accept responsibility for any costs involved including ambulance transport if applicable.	Yes	No	
I agree to pay the excursion costs outlined above if selected.	Yes	No	
<p>The Excursion policy and guidelines and procedures is available on the department's webpage – <a href="https://education.nt.gov.au/policies/school-operations#excursions">https://education.nt.gov.au/policies/school-operations#excursions</a></p>			
If selected, does your child require a uniform? (please circle the items required)	HAT	SHIRT	NO UNIFORM
<p><b>*Darwin Region polo shirt and hat are compulsory, unless your child has these items from previous years*.</b></p>			

Levy: Approx \$400 Venue: Darwin Tennis Centre, Darwin Dates: 16<sup>th</sup> – 18<sup>th</sup> June 2026

Parent's name	
Signature	
Date	

**If selected, you will receive an email with confirmation of selection, team member booklet (to be completed and returned to the Pathways Coordinator),**

**Students who are selected are expected to, hand in all paperwork, and make all levy payments by the due dates. Failure to meet these requirements may result in the student losing their position on the squad.**

**School of Sport Education NT will be selecting a boys and girls team to compete in the School Sport Australia Championships in Brisbane QLD,**

**22-28TH August 2026.**

