



APPENDIX 1

EXCURSION: .....

DATE: ..... CLASS:.....

30 Beerburrum Road
CABOOLTURE 4510
PO Box 1185
CABOOLTURE 4510
Phone: (07) 5495 2266 or 5495 2158
Fax: (07) 5495 8315

Parent/Person With Legal Responsibility for the Student Consent Form

As a Parent/Person with legal responsibility for the student of:

(Child's first name and surname)

I, (Your first name and surname)

give my consent for him/her to participate in the school activity as detailed in the written information supplied to me. I am aware of the nature of the activity and agree to delegate my authority to the staff and instructors involved.

I accept that the teachers and instructors will take appropriate disciplinary action necessary to ensure the safety, well-being and successful conduct of the students who participate in the activities associated with the excursion.

In the event of any illness or accident, I authorise the obtaining of such medical assistance as my child may require. I accept all medical treatment, blood transfusions and/or anaesthetic risks involved and the responsibility for payment of any expenses thus incurred.

I include the completed medical information section (below) about my child to assist those who are organising the excursion.

Signed: (Parent/Person with legal responsibility for the child) Date:

Emergency contact telephone number:

Medical Information: (Please note - Where \* is used, please delete as appropriate)

Does your child have any medical condition or disability which may affect your child's participation in the school excursion? Yes/No\* If Yes, please give details:

(Blank lines for medical condition details)

Is your child on any prescribed medication(s) which would be required to be continued during the excursion? Yes/No\* If Yes, please give details:

(Blank lines for medication details)

Does your child have any allergies (eg. insect bites, food)? Yes/No\* If Yes, please give details:

(Blank lines for allergy details)

Is there any other information you would like to give which, in your view, may affect your child's participation in the excursion? Yes/No\* If Yes, please give details:

(Blank lines for other information)