

"A united community where everybody has responsibility in preparing youth for their future"

Challenge Empowerment Resilience Respect

Parent Excursion Consent

Form to accompany excursion/camp

Student's Name			Year Level
Address			
Telephone (Home)			(Business)
Title of Excursion:			
Educational purpose of the	program:		
Details of supervising staff	:		
Date of Excursion:		Departure:	Return:
Mode of Travel:		Cost:	
Parent consent I have read all of the information o	ntion provided by the sch	ool in relation to the	(full name) to attend.
Parent			(full Name)
Signature:			Date
In case of emergency I can b	e contacted on		or:
Note: Parents should also co	omplete the "Confidential	medical information for se	chool council approved school excursions".
Parent consent I have read all of the information			OFFICE COPY
Date of Excursion:	Departure:	Return:	
I give permission for my dau	ghter/son		(full name) to attend.
Parent :	(full Name	e) Signature:	Date
. In case of emergency I can b	e contacted on:		or:

Note: Parents should also complete the "Confidential medical information for **school council** approved school excursions". **CONTINUED OVER PAGE**

Attachments (if applicable)

Daily itinerary
Group equipment list (if relevant)
Clothing list
Medical form
Further location descriptions (if applicable.

Student Behaviour:

"I understand that in the event of my son's/daughter's misbehaviour or behaviour that poses a danger to himself/herself or others during the excursion, he/she may be sent home. I further understand that in such circumstances I will be informed and that any costs associated with his/her return will be my responsibility.

ICT/Photograph consent

"I agree to my child using the Internet and computer network in accordance with the same Internet student users agreement that applies at their current school. (Strike out if you do not consent).

'I also consent to my child being photographed and /or visual images of my child being taken during activities by the school for use in the school's publications, school's website or for publicity purposes without acknowledgement and without being entitled to any remuneration or compensation'. (Strike out if you do not consent).

Consent for emergency transportation

"In the event of an emergency I consent to my child being transported in a privately owned vehicle driven by a member of the supervisory staff listed above.

Student accident insurance

The Department of Education does not provide student accident cover. Parents may wish to obtain student accident insurance cover from a commercial insurer, depending on their health insurance arrangements and any other personal considerations.

Signed		(Parer	ıt)
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