**CONSENT FORM FOR CAMP, EXCURSION, SPORTING OR ADVENTURE ACTIVITY.**

 **Ardtornish Primary School** Saarinen Ave. St Agnes. Phone: 8264 8099

**(Note: that parents includes independent students, see definitions of the camps and excursions procedure)** ED170 (12/19)

Requirements in this document must not be altered. Please use block letters when filling out this form

**As a parent of:**

|  |  |
| --- | --- |
| STUDENT/CHILD’S NAME |       |

**I:**

|  |  |
| --- | --- |
| PARENT NAME |       |

**give my consent for [name of child] to participate in:**

|  |  |
| --- | --- |
| NAME OF CAMP/EXCURSION/SPORTING OR ADVENTURE ACTIVITY |   Festival of Music rehearsal (Friday 18/8/2023) and concert day (Thursday 14/9/2023)Friday 18/8 is travel by private cars and 14/9 is travel by chartered bus. |

**at/on:**

|  |  |
| --- | --- |
| LOCATION |      Magic Millions Pavilion & Festival Theatre |
|  |
|  | ON: |   18 |   08 |   2023 | AND: |   14 |   09 |  2023 |
|  |  |  |  |  |  |  |  |  |  |  |  |  |

**Does your child have any health support, or medication administration needs that should be considered for camps, excursions etc? Yes ☐ No ☐ N/A ☐**

**If Yes, has a care plan/medication agreement been provided to the school/preschool? Yes** **☐ No****☐ N/A ☐**

*If No, please provide a completed care plan/medication agreement to the school/preschool on completion of this form.*

**Any other matters that may impact your child’s participation in the above activities safely?** **Yes ☐ No ☐**

*If Yes, please outline details to the school/preschool in the box below.*

|  |
| --- |
|  |

Details of **planned activities**, **transport arrangements**, anticipated **number of students/children** and **supervising teachers/instructors** are provided on the back of this sheet.

## Agreement

* I agree to delegate my authority to supervising teachers/instructors. Such supervisors may take whatever disciplinary action they deem necessary to ensure the safety, well-being and successful conduct of the students as a group and individually.
* In the event of an accident or illness and contact with me being impracticable or impossible, I authorise the teacher-in-charge to arrange whatever medical or surgical treatment a registered medical practitioner considers necessary. I will pay all medical and dental expenses incurred on behalf of my child. I understand that I may seek payment of any ambulance invoice by the department if my child does not have private ambulance cover.
* Where appropriate I have also attached additional or updated health care information, including details of any additional health support he/she requires to undertake the above activities safely.
* The information given is accurate to the best of my knowledge.
* I acknowledge that a risk management form is available upon request for my inspection at the site.

|  |  |  |
| --- | --- | --- |
| Signed: |  | Date:            /            / |

**Parent /Legal Guardian (in case of emergency)**

|  |  |
| --- | --- |
| NAME |       |
|  |
| RELATIONSHIP TO CHILD |       |
|  |
|  |
| TELEPHONE (1) |       | TELEPHONE (2) |       | MOBILE |       |
| **Student Medic Alert Number (If applicable):** |       |

\*Any health care information provided is not intended to prevent your child participating unless specific medical advice warrants exclusion. The health care information you supply to the school/preschool will be treated confidentially. Such information is sought in order to protect and assist the student so the activity may be a safe and enjoyable experience. Please contact the teacher-in-charge if you wish to discuss any health care problems.

|  |
| --- |
| **ACTIVITY INFORMATION SHEET** |
| **VENUE and SITE CONTACT DETAILS** |
| Magic Millions Pavilion – 1 Park Tce, Plympton ParkAdelaide Festival centre, King William St Adelaide |
| **REASON FOR and DESCRIPTION of PLANNED ACTIVITIES including the need for SPECIALISED CLOTHING or EQUIPMENT** |
| Festival of Music Rehearsals and Concert Day**Rehearsal #1 at Magic Millions** – Friday August 18 – School Uniform, bring hat, water, recess and lunch**Concert Day at Adelaide Festival Centre** - Thursday September 14 – Performance clothes, school jumper/jacket/snacks/water/food for dinner if not pre ordered. |
| **ITINERARY** |
| **18/08/2023 – Magic Millions Rehearsal**Depart APS @ 8:50am (Private cars)Rehearse from 9:30am – 1;30pm (snack on arrival/break for lunch)Depart for return about 1:45pm**14/09/2023 – Concert Day – Adelaide Festival Centre**Depart APS (chartered bus) @ 11:30amLunch on arrivalRehearseDinner breakConcertDismiss to parents about 9:30pm (after the concert) |
| **TRANSPORT ARRANGEMENTS** |
| 18/8 – Private Cars14/9 – Chartered bus (Grant’s Coachlines) $3 per student (part cost already paid in Choir fee) |
| **FACILITIES AVAILABLE including SLEEPING ACCOMMODATION** |
| N/A |
| **PROGRAM PLANNED FOR STUDENTS NOT ATTENDING** |
| In class as usual |
| **PAYMENT IS DUE BY**: Monday September 11Alternative payment methods and/or financial assistance can be arranged by contacting the Principal or school Finance Officer. | Number of students attending | Number of supervising teachers, instructors and adults attending | The educator to child ratio is | My child can sleep on a top bunk (if applicable)Yes  No  |
| COST $3 |  |  |  |