

OUTDOOR EDUCATION - CONSENT FORM

As a parent / guardian of \_\_\_\_\_

I \_\_\_\_\_ (Block capitals) give my consent for him / her to

participate in \_\_\_\_\_ (name of activity)

(dates inclusive) \_\_\_\_\_

- ◆ **DETAILS OF THE ACTIVITIES PLANNED, TRANSPORT ARRANGEMENTS AND SUPERVISING STAFF ARE PROVIDED ON THE ATTACHED INFORMATION SHEET**

I agree to delegate my authority to the staff and instructors involved. Some teachers and instructors may take whatever disciplinary action they deem necessary to ensure the safety, well-being and successful conduct of the students as a group, or individually in the above-mentioned activity.

I also authorise the teachers and instructors to obtain medical assistance which they deem necessary, should an accident occur and agree to pay all medical and dental expenses incurred or behalf of the above student.

I submit the attached health information about the above student and include details of limitations which he / she has for the activity concerned. I further legally authorise qualified medical practitioners to administer an anaesthetic or to carry out necessary surgical procedures if such an eventuality arises. I give my consent for the above student's local doctor or medical specialist to be contacted in an emergency.

The information given is accurate to the best of my knowledge.

Date \_\_\_\_\_ Signed \_\_\_\_\_ parent / guardian

**EMERGENCY CONTACTS**

<b>PARENT OR GUARDIAN</b>			
Address	Home Phone No.	Work Phone No.	Alternative No.

<b>FAMILY DOCTOR OR MEDICAL CLINIC</b>			
Name	Address	Telephone No.	

<b>MEDICAL SPECIALIST. (if relevant)</b>			
Name	Address	Telephone No.	

**NOTE: - HEALTH INFORMATION**

**ANY HEALTH INFORMATION GIVEN WILL NOT PREVENT YOUR CHILD FROM TAKING PART IN OUTDOOR EDUCATION ACTIVITIES UNLESS FURTHER MEDICAL ADVICE WARRANTS EXCLUSION**  
The information requested on the student health information sheet will be considered confidential by the school and will be treated accordingly. The information is sought in order to protect and assist the student so that the activity may be a safe and enjoyable experience. Please attach extra sheets if required and contact the teacher-in-charge to discuss any student health problems.