



# WAMBERAL Public School



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## Excursion, Performance and Activity Consent Form

June 17, 2022

Dear Parents and Carers,

An excursion, performance or activity has been organised for your child. The information is as follows:

<b>Title</b>	Rugby League – Classic Shield
<b>Brief Description</b>	Rugby League PSSA gala day for students in the Central Coast area
<b>Venue</b>	Morrie Breen Oval, Kanwal.
<b>Day and Date</b>	Friday 1 July, 2022 <b>Permission note is due by Monday 27 June, 2022</b>
<b>Time of departure and return</b>	Please meet at the ground by 9:30am. The first game is scheduled to begin at 10:00am. There may be a second game on the day, with the time of the game dependent on the result of the first game.
<b>Group / Year / Classes involved</b>	Selected Stage 3 students
<b>Transport</b>	Travel will be by private car. Parents are to make arrangements for their child to be transported to and from the venue. Students are to be accompanied by parents / carers to and from the event. Please contact Mr Smith if you are unable to do this.
<b>Cost</b>	Nil
<b>Accompanying staff</b>	Mr Brett Smith
<b>Staff member with CPR/emergency care training</b>	Mr Brett Smith
<b>Dress requirements</b>	School all purpose uniform including a school hat. Students will be provided with jerseys and shorts before we leave school, but will need to provide their own football red/blue socks.
<b>Other requirements</b>	Please pack food and water for the whole day. Please note: There will be a canteen operating at the oval. Students should bring their own football boots, sunscreen and mouthguard. Students will not be allowed to take the field without a mouthguard. Upon arrival, parents will need to scan in via the QR code at the ground. We encourage all spectators to do so before entering the ground.
<b>Behaviour</b>	Student behaviour is considered when assessing the risk of excursions and extra-curricular events for the health and safety of all students and staff. Students must behave appropriately at all times on excursions. The school's discipline policy applies for the duration of this event.
<b>Organising Teacher</b>	If you have any questions or require further information regarding this event, please contact the organising teacher: <b>Brett Smith</b> at school on 4384 1111.

Brett Smith  
Organising Teacher

Paul Miller  
Principal

Please complete the attached permission note and medical information and return to classroom teacher by 27/06/22

## Wamberal Public School Excursion, Performance and Activity Consent Form

**Privacy Note:** The information provided below is being obtained for the purpose of ascertaining relevant medical information, requirements and other health care related needs about the student who is currently enrolled at the school and who may participate in school excursions, sporting activities or other educational or school activities conducted by or in conjunction with Wamberal Public School.

It will be used by officers of the NSW Department of Education to assist planning, to support students, and to minimise risks when conducting school excursions, sporting or other school activities.

Other persons or agencies that may be provided with this information include, but are not limited to, volunteers and members of external organisations who join with the school or are otherwise involved in the planning or delivery of the excursion, sporting or other school activity; and persons that may be called upon to provide health care treatment or other assistance during or as a consequence of such excursions or activities.

Provision of this information is not required by law. However, a failure to provide the information may mean that your child can not participate in a particular excursion or school activity. In such circumstances the school will make available a sound alternative educational experience.

Provision of this information will significantly assist the school in planning a safer educational activity. It will be stored securely. If you have any concerns about provision of this information, please contact the school principal to discuss further.

You may correct any personal information provided at any time by contacting the school office.

**TITLE OF EXCURSION, PERFORMANCE OR ACTIVITY: Rugby League**

**ORGANISING TEACHER: Brett Smith**

**Permission note and payment due by 27/06/22**

### General Permission Details

Please tick

I consent to \_\_\_\_\_ of Class \_\_\_\_\_ participating in  
the Rugby League Class Shield on Friday 1 July 2022.

**Yes**                       **No**

I consent to the travel arrangements for this event.

**Yes**                       **No**

The cost of this event is \$0.00.

I give permission for my child to receive medical treatment in case of  
emergency.

**Yes**                       **No**

### Health Care Needs

When a medical practitioner has prescribed medication (including emergency medication) that will need to be administered during the event, parents are responsible for:

- bringing this need to the attention of the school, including completing a written request to administer medication (forms are available on the school website);
- ensuring that the information is updated if it changes;
- supplying the medication and any 'consumables' necessary for its administration in a timely way;
- ensuring the medication is well within its expiry date; and
- collaborating with the school in working out arrangement for the supply and administration of the prescribed medication for the duration of the event.

For some events, the school will ask parents to supply the medication in a different way to what has already been agreed by the school. For example, parents may be asked to supply an additional adrenaline autoinjector (i.e. *EpiPen*® /*Anapen*®).

For asthma and anaphylaxis it is important for students to have immediate access to their medication. Please consider whether your child should carry their own *EpiPen*®, *Anapen*® or asthma reliever medication while at school. Permissions for students to carry their own asthma or anaphylaxis medication can be downloaded from the school website.

My child has a Health Care Plan at school.

**Yes**                       **No**

My child has the following special needs (please provide full details and include any relevant medical details)

### Parent / Carer Details

Name: \_\_\_\_\_

Contact Number on the day: \_\_\_\_\_

Signature \_\_\_\_\_

Date: \_\_\_\_\_

