



# Parent Excursion Consent

## Greenhills Cross Country Carnival Grades 3-6

**Thursday 16<sup>th</sup> April, 2020**

**2<sup>nd</sup> March, 2020**

The Greenhills Cross Country Carnival for students in the years 3-6 will be held on **Thursday 16<sup>th</sup> April, 2020**. Results will be used to assist in the selection of the Greenhills Cross Country Team.

**Event Times:**

- **Grade 3/4s: 9.30am – 11.00am approx.**
- **Grade 5/6s: 11.30am – 1.15pm approx.**

**What to wear/take on the day:**

- **House colours may be worn – however, they must be suitable to run in.**
- **Snacks**
- **Water bottle/s**
- \*\* If your child is asthmatic, it is strongly advised that they take their "puffer".**

The course for all age groups is approximately 2km. All students are encouraged to attend and participate. Children can walk, jog or run to the best of their ability.

**Please return the form below with payment by Monday 16<sup>th</sup> March, 2020**

**Details of supervising staff:**

Jordan Daley – organiser.

All year 3-6 teachers will be attending with their grades.

**Departure details:**

Year 3/4 Students: 9.00am  
Year 5/6 Students: 11.15am

**Travel arrangements:**

Bus

**Costs:**

\$50 – this covers the cost of all Greenhills Carnivals (Swimming, Athletics & Cross Country). Payment was due on Monday 2<sup>nd</sup> March, 2020.

**Return details:**

Year 3/4 Students: 11.15am  
Year 5/6 Students: 1.30pm

**Location:**

Whatmough Park / Partington's Flat –  
Kalparrin Avenue, Greensborough

**Activities within this program present the potential for students to sustain physical injury. The following procedures will be implemented – along with other strategies – to manage the potential risks in the program.**

- Teachers with First Aid Training to administer appropriate treatment within their capacity.
- Parents will be called if the injury requires that the child receive medical care.
- An ambulance will be called for emergency treatment – parents will be called if an Ambulance has been called for their child.

#### **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.

#### **Medical consent**

Where the teacher-in-charge of the excursion is unable to contact me, or it is otherwise impracticable to contact me, I authorise the teacher-in-charge to:

- Consent to my child receiving any medical or surgical attention deemed necessary by a medical practitioner.
- Administer such first-aid as the teacher-in-charge judges to be reasonably necessary.

**Please return this section with payment by Monday 16<sup>th</sup> March, 2020**

#### **Parent consent**

I have read all of the above information provided by the school in relation to the **Greenhills Cross Country Carnival (16/04/20)**.

I give permission for my daughter/son, \_\_\_\_\_ of Grade \_\_\_\_\_, to attend and in the event of an emergency I give my consent to medical treatment & emergency transportation as stated in other information provided for this excursion.

**Parent/guardian:** Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Emergency 1:** Name: \_\_\_\_\_ Contact No.: \_\_\_\_\_

**Emergency 2:** Name: \_\_\_\_\_ Contact No.: \_\_\_\_\_

**COST: \$50**

**PAYMENT OPTIONS:** (please circle)

CASH / CHQ / QKR Ref: \_\_\_\_\_ / CREDITCARD / BPAY \_\_\_\_/\_\_\_\_

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EXCURSION TO: **Greenhills Cross Country Carnival (16/04/20)**

I wish to pay by: VISA ☐ MASTERCARD ☐ **Child's Name:** \_\_\_\_\_ **Grade:** \_\_\_\_\_

**COST: \$50** AMOUNT PAID: \$ \_\_\_\_\_ Phone No.: \_\_\_\_\_

CARD NUMBER

\_\_\_\_ \_ Expiry Date: \_\_\_\_/\_\_\_\_

CARDHOLDER'S NAME \_\_\_\_\_ SIGNATURE \_\_\_\_\_

**PLEASE NOTE:** A receipt will be issued