



GENERAL CONSENT FORM (Place a tick in the boxes below)

Name of Student: _____

Year Level: _____

Please tick the activities that you wish for your child to participate in for the duration of their enrolment.

- After school sports training
- Concert Practice/Awards Night Practice
- Arts Council
- Cross Country
- Swimming Pool (Fee to pay)
- Local Class Excursions
- Physical Education and local sport
- Religious Education Classes
- Texas Telegraph by email, email address _____
- Church Services e.g. Easter and Christmas Service
- First Aid—Eg: Stingoes, Dettol, Savlon cream
- Memorial Services, e.g. Anzac Day, Remembrance Day
- 'PG' Rated Movies

Parents are advised that the Department does not have Personal Accident Insurance cover for students. Physical education, particularly contact sports, carries inherent risks of injury. It is a personal decision for parents as to the type and level of private insurance they arrange to cover students for accidental injury that may occur.

Parents are advised that Queensland Ambulance may charge a fee if the ambulance is called to attend to their child.

I _____ (parent/caregiver) hereby give permission for _____ to take part in the above activities that have been ticked.

Signed: _____

Date: _____

