

Excursion Consent Form Section A

ENGLISH

Please complete the relevant details on this form **in English** and return to the school by _____

Privacy Advice

The personal information provided on this consent form will be used by the Department of Education and Training for general administration and communication and other matters of welfare relating to your child at this excursion. While the provision of this information is voluntary, it is strongly recommended that all details are completed. Failure to do so may impede the resolution of welfare issues if you are not able to be contacted. This information will be stored securely. You may access or correct any of the details at any time by contacting the school.

Please tick the appropriate boxes below:

- ☐ I consent to my child participating in the forthcoming school excursion, the details of which appear below.
- ☐ I do not consent to my child participating in the forthcoming school excursion.

Please note if you do not consent to your child participating in the excursion, please enter your child's name in the box below, sign the form to indicate you have received it and return this note to school.

Excursion Details

Insert child's name.	Insert date/s of excursion.	Insert place of excursion.
☐ I have enclosed the cost of the excursion. \$ (Total enclosed)	☐ I have not enclosed the cost of the excursion.	
☐ I have completed the overnight excursions response.	☐ The overnight excursions response does not apply.	
☐ I have completed the water or swimming activities response.	☐ The water or swimming activities response does not apply.	
☐ I have completed the travel insurance response.	☐ The travel insurance response does not apply.	
☐ My child has special medical requirements for this excursion and I must complete the <i>Medical information form</i> .	☐ My child does not have any special medical requirements for this excursion.	

Signature of parent or caregiver _____