

Section A

Dear parent or caregiver,

's class will be going on an excursion to on to .

This excursion has been planned to supplement the following work being done in the classroom:

The cost of the excursion is \$

The class will depart from at and return to at

Travel will be by .

The staff member with CPR training is

Accompanying staff are

Insert as appropriate:

- **Preschool Advice**
- **Overnight excursion advice**
- **Water activities advice**
- **Travel insurance advice**
- **Preschool advice**
- **Privacy advice – whenever personal information is sought the privacy advice must be included.**
- **Overseas excursion advice, including travel, itinerary, accommodation and supervision details.**

Excursion coordinator

Principal

Please detach and return to by

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I do / do not consent to participating in an excursion to on .

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

I understand that my child will receive medical treatment in the case of an emergency.

IMPORTANT NOTE:

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

Bringing this need to the attention of the school

Ensuring that the information is updated if it changes

Supplying the medication and any 'consumables' necessary for its administration in a timely way. The medication should be well within its expiry date.

Collaborating with the school in working out arrangements for the supply and administration of the prescribed medication for the duration of the excursion. For some excursions the school will ask you to supply the medication in a different way to what has been already agreed to by school. You may be asked to supply an additional adrenaline autoinjector (i.e. EpiPen® /Anapen®) for example.

Insert as appropriate:

- **Overnight excursions – response**
- **Water activities – response**
- **Travel insurance - response**

Signature

Date

Section B

Overnight excursions - advice

Accommodation will be at

Travel will be by

The group will be supervised by

Additional information (consider advice on the number of students and teachers, protective clothing or equipment)

.....

Overnight excursions - response

I understand that my son / daughter will stay overnight at

.....

Water or swimming activities - advice

The excursion will involve the following water or swimming activities:

.....

These activities will take place at:

The school will provide the following flotation devices to students who may require assistance in the water:

Water or swimming activities - response

In relation to the proposed water or swimming activities, I advise that my child is a: (*please tick one*)

strong swimmer average swimmer poor swimmer non-swimmer

I advise that my child requires the following flotation device to assist him/her in the water:

.....

I undertake to provide this device so that my child can participate in the excursion. Yes / No

I give / do not give permission for my child to participate in the water or swimming activities.

Travel insurance - advice

The Department recommends that parents or caregivers arrange travel insurance for students for intrastate or interstate excursions that require travel by air.

Travel insurance - response

I have arranged travel insurance with

A copy of that policy is attached.

Preschool excursions - advice

The number of preschool children attending will be.....

The number of teachers and responsible adults will be.....

The adult to child ratio will be

Privacy notice

Note: A Privacy notice must appear on all forms issued by the Department used for collecting personal information. A sample *Privacy advice* notice is below for use with consent forms. Principals will need to fill in the blanks to make this relevant to each particular excursion. A Privacy notice will also need to be included on any electronic personal information data collection system.

For further information on privacy and the *Privacy and Personal Information Protection Act 1998* please see <https://detwww.det.nsw.edu.au/lists/directoratesaz/legalservices/ls/privacy/index.htm>

Privacy - advice

The information provided on [...*date*...] by [...*name*..] is being obtained for the purpose of ascertaining relevant medical information, requirements and other health care related needs about [...*student name*...] 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 [...*name of school*...].

It will be used by the NSW Department of Education and Communities 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.

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.