

Parent Excursion Consent **Swimming Sports 2022**

Location:

Aquamoves Shepparton, 25 Tom Collins Dr, Shepparton

Date and Time

Please ensure arrival at school no later than 8:45am.

Years 7 to 9: 9:00 and to 3:15pm, February 2022. Date to be confirmed, week 2 or 3 Term 1.

Years 10 to 12: 9:00 and to 3:15pm, February 2022. Date to be confirmed, week 2 or 3 Term 1.

Educational purpose of the program:

Swimming carnivals rejuvenate the school community as a whole, bringing it together and building on the school values to provide an exceptional foundation for students. Sport participation creates a positive impact to the personal and academic development of students.

Details of supervising staff & Name and contact details of the school emergency contact:

This information will be provided prior to the event via Compass and an Information Sheet distributed to students.

Costs:

There is no charge for this excursion. Return bus transportation and pool entry are paid by the school.

What to bring:

- House coloured clothing
- Bathers
- Towel
- Water
- Lunch
- Hat and sunscreen

Distance from expert medical care:

The School Nurse will be in attendance. The nearest medical facility is GV Health, approx. 3.5km from the venue.

Travel arrangements:

Return bus transportation will be provided from the school. It is important for student care that students go to the venue and return to school on the bus. Parents are not permitted to take students home early.

Event activity:

Students will be given directions about safe swimming, appropriate boundaries, standards of behaviour and emergency procedures relevant to the location. A risk management plan for this program has been developed and is available for parents to review on request.

Attachments

Please complete and return the attached 'Confidential medical information for School Council approved school excursions'.

Student behaviour

'I understand that in the event of my child's misbehaviour or behaviour that poses a danger to himself/herself or others during the excursion, he/she may be sent home. I further understand that in such circumstances I will be informed and that any costs associated with his/her return will be my responsibility.'

Student illness

'I understand that in the event excursion staff determine it is necessary for my child to be sent home early due to illness, any cost associated with his/her return will be my responsibility.'

Cancellations or Alterations

'I understand that the principal may need to cancel or alter excursion arrangements at short notice, for safety reasons or due to circumstances beyond the control of the school, and while the principal will try to minimise inconvenience or financial losses to parents, these may be unavoidable.'

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Student accident insurance and ambulance cover

The Department of Education does not provide student accident insurance or ambulance cover. Parents may wish to obtain student accident insurance from a commercial insurer and/or ambulance cover, depending on their health insurance arrangements and any other personal considerations.

Contact tracing

Some excursion venues are required to collect contact details and are responsible for managing record keeping for contact-tracing in line with current public health directives.

Most venues are required to use electronic record keeping that connects with an Application Programming Interface (API) linked provider or a digital system provided by Services Victoria.

The Department of Health has strongly recommended that a contact number for each individual student is provided. Providing contact details for individual students will expedite contact tracing so that individuals can be contacted by the Department of Health if required. Parents/carers/guardians are advised that, when required, the school will be providing excursion venues with contact details for students. The phone number on school file for the student will be provided as the nominated contact number.

Venues will be collecting student names and contact phone numbers for a legitimate purpose and are subject to Victorian privacy laws so will handle the information securely and only retain it for the required 28-day period.



PLEASE USE A SEPARATE FORM FOR EACH CHILD AT THE SCHOOL

Parent/Carer consent

I have read all of the above information provided by the school in relation to the Junior School Swimming Sports, including any attached material.

I give permission for my son/daughter to attend the Junior Swimming Sports:

Student Name: _____ Year: _____

Parent/carers: _____
(full name) (signature) (date)

In case of emergencies I can be contacted on phone number: _____ OR

