

Gembrook Rd.,
 Cockatoo 3781
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| CONSENT FORM FOR SCHOOL INCURSION | |
| Activity: Healthy Rivers IncurSION | |
| Date of Activity: Friday 19/10 | Cost: No charge |
| Venue: Cockatoo Primary School | |
| Details: Project summary: The "Healthy Rivers, Healthy Bay" initiative aims to raise community awareness within two major catchments (Yarra and Dandenong) feeding into the Bay. We will instil a sense of ownership and environmental stewardship through student and teacher workshops, with a focus on local waterways as part of a larger catchment, highlighting stormwater/litter issues, undertaking water quality testing and litter audits. "Riverbank Rescue" events will link schools, local councils and environment groups. At the end of year Student Leadership Conference, students will compare results and develop action plans to help their local environment. | |
| Consent form to be returned by Wednesday 17 th October | |
| Teachers attending: Tim Stapleton, Jutta Burghstahler, Shane Pearton | |

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CONSENT FORM FOR SCHOOL INCURSION

I give permission for my child _____ in Grade _____
 to attend the **Healthy Rivers** program

CONSENT TO MEDICAL ATTENTION ON INCURSION

*Does your child have an allergy medical condition that may require treatment on the day?
 Please provide details of the condition and supply relevant medication, to the teacher, on the day,
 along with dosage details and time of administration. Please ensure the note is signed and dated.*

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 such medical or surgical attention as may be deemed necessary by a medical practitioner,
- Administer such first aid as the teacher in charge may judge to be reasonably necessary.

The Department of Education requires this consent form to be signed for all students attending school excursions.

On days of extreme weather conditions an excursion may be cancelled at the last minute for safety reasons.

Signature Parent/Guardian _____ Date _____