

CONSENT FORM FOR CAMP, EXCURSION, SPORTING OR ADVENTURE ACTIVITY

(Note: that parents includes independent students, see definitions of the camps and excursions procedure)

Requirements in this document must not be altered. Please use block letters when filling out this form

As a parent of:

STUDENT/CHILD'S NAME	
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I:

PARENT NAME	
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give my consent for [name of child] to participate in:

NAME OF CAMP/EXCURSION/SPORTING OR ADVENTURE ACTIVITY	Primary Term 2 Excursion- Art Gallery of South Australia
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do not give my consent for [name of child] to participate in any religious activities outlined below (if applicable) ☐

at/on:

LOCATION	Open Access College at Marden
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FROM:

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 TO:

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 OR ON:

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Does your child have any health support, or medication administration needs that should be considered for camps, excursions etc? Yes ☐ No ☐ N/A ☐

If Yes, has a care plan/medication agreement been provided to the school/preschool? Yes ☐ No ☐ N/A ☐

If No, please provide a completed care plan/medication agreement to the school/preschool on completion of this form.

Any other matters that may impact your child's participation in the above activities safely? Yes ☐ No ☐

If Yes, please outline details to the school/preschool in the box below.

List the names of any other adults or siblings that will be attending with the OAC student. Alternatively, let us know if your child will be attending without an adult:

Details of **planned activities, transport arrangements**, anticipated **number of students/children** and **supervising teachers/instructors** are provided on the information sheet below.

Agreement

- I agree to delegate my authority to supervising teachers/instructors. Such supervisors may take whatever disciplinary action they deem necessary to ensure the safety, well-being and successful conduct of the students as a group and individually.
- In the event of an accident or illness and contact with me being impracticable or impossible, I authorise the teacher-in-charge to arrange whatever medical or surgical treatment a registered medical practitioner considers necessary. I will pay all medical and dental expenses incurred on behalf of my child. I understand that I may seek payment of any ambulance invoice by the department if my child does not have private ambulance cover.
- Where appropriate I have also attached additional or updated health care information, including details of any additional health support he/she requires to undertake the above activities safely.
- The information given is accurate to the best of my knowledge.
- I acknowledge that a risk management form is available upon request for my inspection at the site.

Signed: _____

Date: / /

Parent (in case of emergency)

NAME					
RELATIONSHIP TO CHILD					
TELEPHONE (1)		TELEPHONE (2)		MOBILE	
Student Medic Alert Number (If applicable):					

*Any health care information provided is not intended to prevent your child participating unless specific medical advice warrants exclusion. The health care information you supply to the school/preschool will be treated confidentially. Such information is sought in order to protect and assist the student so the activity may be a safe and enjoyable experience. Please contact the teacher-in-charge if you wish to discuss any health care problems.



ACTIVITY INFORMATION SHEET

(Note: for a series of activities that take place on a regular basis (including regular outings), list all individual activities, dates, locations, cost, transport, supervision arrangements and start and dismissal times)

REASON FOR AND DESCRIPTION OF PLANNED ACTIVITIES – INCLUDING SPECIALISED CLOTHING OR EQUIPMENT THAT WILL BE REQUIRED AND PROGRAMS PLANNED FOR STUDENTS UNABLE TO ATTEND	<p>R-6 Primary Marden students are invited to join us at the Art Gallery of South Australia to learn about Aboriginal culture through a guided tour and join in an appreciation of art dance workshop.</p> <p>We ask that students come wearing comfortable active wear, including wet weather gear. Please also bring: hat, sunscreen, water bottle, packed lunch.</p> <p>Date: Wednesday Week 5 (26th May) Time: 10:30am- 2:00pm</p> <p>For those students who are unable to attend, a modified online program will be provided. A teacher will show and discuss with you some of the art works within the gallery. Your teacher will be in touch with lesson times.</p> <p>10:30 am Meet in front of Art Gallery 10:45 am Walk together, as a group, to the fish gates. Store bags etc. 11:00 am Dancing in the Gallery workshop (60 mins) 12:00 pm Walk back to sculpture courtyard for lunch & getting to know you activities 12:40 pm Gather to meet guide for tour 12:45 pm Guided Tour: Aboriginal and Torres Strait Islander art 1:45 pm Collect bags and dismissed from front of Art Gallery by 2pm</p>
TRANSPORT ARRANGEMENTS – INCLUDING DESCRIPTION OF DESTINATION AND PICK UP LOCATION, METHOD, MEANS AND ANY SPECIFIC REQUIREMENTS FOR SEATBELTS OR SAFETY RESTRAINTS	<p>Families to organise own transport arrangements to and from Art Gallery of South Australia.</p> <p>Meeting Place Outside the front of the Art gallery. We will then walk together, as a group, to the fish gates. Where possible please keep baggage to a minimum. You will not be allowed backpacks etc. around the gallery. These will be stored on a baggage trolley by the gallery staff and accessible during lunch break. When you arrive please check in with a member of OAC staff.</p> <p>Buses and trams frequent stops along North Terrace. Closest city parking can be found at Wilson car park- Adelaide central and Wilson car park -251 North Terrace, at a cost (book online for a cheaper rate - Early bird {entry after 10am and exit before 6pm} \$13 . Alternatively there is a park and ride at the Adelaide entertainment centre with the tram stopping right outside the Art Gallery.</p>
SLEEPING ARRANGEMENTS (WHERE APPLICABLE)	N/A
NUMBER OF STUDENT/CHILDREN ATTENDING	All R-6 students have been invited. We are expecting approximately 20 students across all year levels. Siblings and parents/guardians are welcome to attend.
NUMBER OF SUPERVISING TEACHERS, INSTRUCTORS AND ADULTS ATTENDING	<p>Based on 20 students attending (R-2 5 students and 3-6 15 students) a minimum of 3 teachers will be attending and supervising at all times. 2 staff members from the Art Gallery will facilitate the tour and the dance workshop.</p> <p>Parents are encouraged to self-explore the gallery during the tour and workshop to allow students maximum participation however, we understand this won't be possible for some families.</p>
FOR EDUCATION AND CARE SERVICES – THE EDUCATOR TO CHILD RATIO	<p>Year R-2 ratio is 1:6 Year 3-6 ratio is 1:10</p>
COSTS – INCLUDING DETAILS OF ANY FINANCIAL ASSISTANCE AVAILABLE	<p>\$9 per OAC student. Discounts for families: 2 students \$15 or 3 students for \$20. Please make payment:</p> <ul style="list-style-type: none"> Online via the excursions link on the Fees and Payments section of the College's website Bank transfer to Open Access College – Account Number: 2788 24640, BSB: 105-069, Reference: Come In <Student Name> Over the phone by calling 8309 3500 and selecting option 4 (between 8am – 3.30pm weekdays) – use this option if arranging concessions School card holders may negotiate the cost with Casey Hall
CONTINGENCY PLANS – INCLUDING ALTERNATIVE PROGRAMS (WHERE APPLICABLE)	<p>All arranged activities at the Art gallery will go ahead in any weather. In the event that an extreme weather condition or state of emergency is declared (e.g. COVID restrictions, bushfire, etc.) the event will be cancelled.</p> <p>Parents/guardians will be notified by email and, if appropriate, regular online lessons will be held.</p>
SITE BASED CONTACT PERSON AND TELEPHONE NUMBER AND SITE CONTACT DETAILS	<p>Casey Hall casey.hall876@schools.sa.edu.au 8309 3570 / During event: 0405 441 241</p> <p>All Forms to be returned to your teacher and payments made due by 4pm Friday Week 4 (21st May).</p> <p>Unfortunately, we are unable to accept late consent forms.</p>

Consent Form – Child/Student

Permission to use image, video, voice, and/or creative work of students and children

The Department for Education develops teaching, learning and promotional materials and publishes them in print and digitally (eg on websites and social media accounts). Students also publish their own materials on websites (eg school website, department website, Scootle™, iTunes™ or other online environments).

By completing and returning this form, I grant permission for the Department for Education to create/use:

- photographs, video or audio recordings of my child
- samples of my child's work
- my child's first name and school/preschool/service name

and to distribute them in the following locations:

- printed publications (eg newsletters, year book, promotional material)
- secure intranet websites and publicly accessible websites, including social media accounts.

The permission will continue until I revoke permission in writing to the principal of the school, director of the preschool or manager of the service.

Any material placed on publically accessible websites under a Creative Commons licence will be available to download and use. This licence allows for the replication, distribution, display, performance and remixing of copyrighted work, provided that the author is credited.

Notes

- Items might not appear in exactly the form in which they have been submitted and not every item for which permission is granted will be used.
- Items which contain images/references to Aboriginal and Torres Strait Islander people may be accompanied by warning text to indicate that the work may include people who have passed away.
- Where permission is revoked, every effort will be made to remove relevant media from distribution, however this may not be possible or practical in some situations.

Signatures

Additional optional permissions (tick if yes)

- ☐ I also grant permission for my child to be photographed/recorded by external media organisations for publication/broadcast.

Name of child/student:

(Full name - please print)

Name of school/service:

Parent/guardian's signatures:

(Parent/guardian to sign)

(Parent/guardian to sign)

Full name of parent(s)/guardian(s):

(please print)

(please print)

Date: _____

Please provide signatures of both parents and/or guardians where possible.

This form must be filed in a central location at the school