

Confidential Medical Information for School Approved Excursions

The school will use this information if your child is involved in a medical emergency. All information is held in confidence. This medical form must be current when the excursion/program is run.

Parents are responsible for all medical costs if a student is injured on a school approved excursion unless the Department of Education is found liable (liability is not automatic). Parents can purchase student accident insurance cover from a commercial insurer if they wish to.

Excursion/program

Name: Camp Waratah Bay

Date(s): 31st May, 1st and 2nd June

I _____ give permission for my son/daughter _____ to participate in this Camp.

Student's full name: _____

Student's address: _____ Postcode: _____

Date of birth: _____ Year level: _____

Parent/guardian's full name: _____

Name of person to contact in an emergency (if different from the parent/guardian): _____

Emergency telephone numbers: After hours _____ Business Hours _____

Name and address of family doctor: _____

Medicare Number: _____ Medical/hospital insurance fund: _____

Ambulance subscriber? Yes No If yes, ambulance number: _____

Please tick if your child suffers any of the following:

Asthma (if ticked, complete Asthma Management Plan)

Diabetes Travel sickness Fits of any type Blackouts

Dizzy Spells Heart condition Migraine

Other: _____

Allergies

Please tick if your child is allergic to any of the following:

Penicillin Other drugs: _____

Foods _____

Other _____

What special care is recommended for these allergies? _____

Year of last tetanus immunisation: _____

(Tetanus immunisation is normally given at five years of age (as Triple Antigen or CDT) and at fifteen years of age (as ADT))

Medication

Is your child taking any medicine(s)? Yes No

If yes, provide the name of medication, dose and describe when and how it is to be taken

All medication must be given to the teacher-in-charge. All containers must be labelled with your child's name, the dose to be taken as well as when and how it should be taken. The medications will be kept by the staff and distributed as required. Inform the teacher-in-charge if it is necessary or appropriate for your child to carry their medication (for example, asthma puffers or insulin for diabetes). A child can only carry medication with the knowledge and approval of both the teacher-in-charge and yourself.

Medical consent

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 any medical or surgical attention deemed necessary by a medical practitioner.

Administer such first-aid as the teacher-in-charge judges to be reasonably necessary.

Signature of parent/guardian (named above)

_____ Date _____

The Department of Education requires this consent to be signed for all students who attend government school excursions.