

## Beerwah State High School

### **Surfing Excursion**

Dear Parent/Caregiver 11<sup>th</sup> February, 2021

As part of the year 11 & 12 Sport and Recreation course, your student will study Lifesaving/Surfing in Term 1. To enhance the learning associated with this unit, the school has organised an excursion to Kings/Dicky/Happy Valley Beach (Location dependant on surf conditions). Students will participate in  $3 \times 90$  minute sessions aimed at assisting in their learning of surfing.

To be able to attend this excursion students must have paid their SRS fees and Subject Levies in full, or have set up a Payment Plan through Finance.

#### **DETAILS OF EXCURSION:**

Date of Excursion: Thursday 11<sup>th</sup>, 18<sup>th</sup> & 25<sup>th</sup> March 2021

Cost: \$67

Dress Code: Full School Uniform. Students can change into swimming attire at

the venue.

Time of Excursion: 8:45am (Meet at front of the school)

Estimated time of return to school: 11:45am Means of Transport: Bus

Venue: Kings, Dicky or Happy Valley Beach

Teachers in Charge: Mr Nick Stead, Mr Darren Rogers & Mr James Kratzmann

Behaviour: As per School's Behaviour Policy

Please complete permission and medical form attached and return them to the office no later than 24<sup>th</sup> February.

Regards

Lyn McDonald Steve Jeffrey

Principal HOD HPE



## Beerwah State High School

#### **Surfing Permission**

**CONSENT FORM:** PLEASE COMPLETE AND RETURN TO YOUR TEACHER OR THE OFFICE

#### **Privacy notice:**

The Department of Education is collecting the personal information requested in this form in order to:

- obtain lawful consent for your child to participate in the activity;
- help coordinate the activity;
- respond to any injury or medical condition that may arise during, or as a result of the activity; and
- update school records where necessary.

The information will only be accessed by authorised school staff and will be dealt with in accordance with the confidentiality requirements of, as applicable, s.426 of the Education (General Provisions) Act 2006 (Qld), the Information Privacy Act 2009 (Qld), and/or the Privacy Act 1988 (Cwlth). The information will not be disclosed to any other person or agency unless the disclosure is authorised or required by law, or you have given the department permission for the information to be disclosed.

#### Activity risks and insurance: The perceived inherent risks for these activities are HIGH.

Please note that the Department of Education does not have personal accident insurance cover for children/students. If your child is injured as a result of an accident or incident while participating in the activity, all costs associated with the injury, including medical costs are the responsibility of the parent/carer. Some incidental medical costs may be covered by Medicare. If you have private health insurance, some costs may also be covered by your provider. Any other costs must be covered by parents/carers. It is up to all parents/carers to decide what types and what level of private insurance they wish to arrange to cover their child. Please take this into consideration in deciding whether or not to allow your child to participate in this activity.

#### Consent:

By signing this form I agree that:

- I have read all of the information contained in this form in relation to the activity (including any attached material) and I am aware that the department does not have personal accident insurance cover for students/children.
- I give consent for my child, to participate in the activity detailed in this permission letter.
- · I will pay to the school the costs detailed in this consent form for my child's participation in the activity.
- In the event of an accident or illness, school staff may obtain or administer any medical assistance or treatment my child may reasonably require, including contacting my child's doctor.
- I accept liability for all reasonable costs incurred by the department in obtaining such medical assistance or treatment (including any transportation costs) and undertake to reimburse the department the full amount of those costs.
- I have provided the school all relevant details of my child's medical or physical needs on registration /enrolment and where relevant have updated this information.
- The teachers involved may take whatever disciplinary action they deem necessary to ensure the safety, well-being and successful conduct of
  the students as a group, or individually, in the above-mentioned activity

Student name:	Form Class:	Date:
Parent/Carer's name:	Parent/Carer sign	nature:
Additional medical information		
The school collected medical information about you OneSchool. Please give full details of any new or up activity described in the form.	_	
I would like this additional information about m	ny child's medical information to be recorded i	in OneSchool records.
STAFF TO COMPLETE~  EXCURSION: SURFING PERMISSION  DATE OF EXCURSION: 11 <sup>th</sup> , 18 <sup>th</sup> & 25 <sup>th</sup> March	REFERENCE NUMBER: EXCURSION COORDINATOR: STEANI FACULTY: HPE	



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