

# PARENT CONSENT FORM

1st May 2017

## MERRIWA PRIMARY SCHOOLS

BALTIMORE PARADE, MERRIWA WA 6030

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Dear Parent/Guardian,

I am pleased to provide you with the following details regarding our early childhood Australian Animal incursion. We will be participating in a hands-on wildlife display to learn about different Australian Animals; such as the dingo, koala and different species of pythons and lizards and how to care for them. The animals are visiting our school to supplement the work being completed in our literacy and humanities and social science learning areas. Our class will attend a session with West Oz Wild Life on **Tuesday 6th of June**.

The cost of the incursion is **\$9.00** per child.

Thank you,

Kristie Avins

Early Childhood Team

### PARENT/GUARDIAN CONSENT

I have read and understood the information regarding the **West Oz Wildlife Incursion on 6th June 2017** and give my consent for my son/daughter (Full Name) \_\_\_\_\_ to participate.

Staff accompanying students on incursions will take all reasonable care while the students are in their charge to protect them from injury and to control and supervise their activities. Parents and guardians should be aware that staff members are not responsible for injuries or damage to property which may occur during the incursion where, in all circumstances, staff have not been negligent. Where it is not practical to communicate with me, I authorise the teacher in charge of the incursion to consent to my child receiving such medical treatment as may be considered necessary, and understand that I will be responsible for any costs incurred.

I am aware that the Department of Education insurance does not cover personal accidents through misadventure nor loss or damage of personal belongings.

If my child's medical details have changed since I have completed the Student's Information Sheet, I will contact the school to update this information

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**I enclose \$9.00 as payment for the incursion.**

I can be contacted on \_\_\_\_\_ (phone/mobile number) during the time that my child is participating in the incursion.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian

**NOTE: Failure to return this form means the teacher does not have the authority to include your child in the planned activity.**

**PLEASE SIGN AND RETURN THIS FORM TO YOUR CLASSROOM TEACHER BY TUESDAY 23RD MAY.**