

BLANKET CONSENT FOR EOTC ACTIVITIES WHILE ATTENDING AJHS (not overnight)

Education Outside the Classroom (EOTC) is the name given to all events/activities that occur outside the classroom, both on and off the school site. This includes sport.

- Our school believes in using a range of environments and experiences to enhance our students' learning.
- We have ready access to the beach, rivers and the bush in our area and beyond. We are also close to various built up environments in our community. These areas are rich learning environments for our students both in and out of school. They need to learn how to be safe. Our school also values the concept of providing students with opportunities, thus some of the learning for students occurs beyond the school site and this document is seeking your consent for your child to participate in such learning.

The Ministry of Education's **EOTC guidelines** identify four EOTC activity types, each with recommended types of parental/caregiver consent. In brief they are:

Type of event	Description	Type of consent
A	On-site in the school grounds (i) Low risk environments (ii) Higher risk environments*	(i) Blanket consent while attending AJHS (ii) Separate consent for each event or programme
B	Off-site events in the local community occurring in school time (i) Lower risk environments sports events, day trips to factories and restaurants (ii) Higher risk environments*	(i) Blanket consent while attending AJHS (ii) Separate consent for each event or programme
C	Off-site events finishing after school finishes (i) Lower risk environments sports events, day trips to factories and restaurants (ii) Higher risk environments*	(i) Blanket consent while attending AJHS (ii) Separate consent for each event or programme
D	Off-site residential overnight events (i) Lower risk environments (ii) Higher risk environments*	(i) Separate consent for each event or programme (ii) Separate consent for each event or programme

* Involves risk assessed to be greater than that associated with the average family activity.

ALL EOTC activity categories require staff to undertake an analysis of the risks and identify the management strategies required to eliminate, isolate and minimise the risks. Emergency procedures are also in place.

BLANKET CONSENT

I/we agree to the participation of _____ (**Child's Name**) in lower risk category A and B and C EOTC events while attending Albany Junior High School.

I/we have completed the medical form provided and will continue to update the school with any new medical, supervision and learning information as required to keep this information current.

Name: _____ Signature: _____
 (Parent/Caregiver) (Parent/Caregiver)

Date: _____

Name: _____ Signature: _____
 (Parent/Caregiver) (Parent/Caregiver)

Date: _____

See Over

DISCLAIMER

I will ensure that prescribed medication is clearly labelled, securely fastened and handed to the designated adult with instructions on its administration if staff are required to administer it.

1. I will inform the school as soon as possible of any changes to my child's medical information or other circumstances between now and the commencement of the event.
2. I agree to my child/myself receiving any emergency medical, dental, or surgical treatment, including anaesthetic or blood transfusion, as considered necessary by the medical authorities present.
3. Any medical costs not covered by ACC or a community service card will be paid by me.
4. I agree to my child taking part in EOTC events and have read the information sheet. I agree to their participation in the activities described. I acknowledge the need for them to behave responsibly.
5. If my child is involved in a serious disciplinary problem, including the use of illegal substances and/or alcohol, or actions that threaten the safety of others, s/he will be sent home at my expense.

Details on these forms will remain confidential to school staff, contractors and volunteers associated with supervising activities on the EOTC event. For safety reasons, please provide us with information that is accurate and complete.

ACKNOWLEDGEMENT OF RISK

I understand that there are risks associated with involvement in school EOTC events and that these risks cannot be completely eliminated. I understand that the school will identify any foreseeable risks or hazards and implement correct management procedures to eliminate, isolate or minimise those hazards. I will do my best to ensure that my child and I follow these procedures. I know that I am able to ask any questions of the school about the activities my child will be involved in, to gain a better understanding of the risks involved. I recognise that participation in such activities is voluntary and not mandatory. My child and I both understand that they may withdraw from the activity if they feel at risk. This must be done in consultation with the person in charge. I understand that the school does not accept responsibility for loss or damage to personal property and that it is my responsibility to check my own insurance policy.

Name: _____
(Parent/Caregiver)

CONTACT DETAILS

Home Ph: _____ Work Ph: _____ Mob Ph: _____

Parent/Caregiver Address: _____

Signature: _____ Date: _____
(Parent/Caregiver)