
NARACOORTE SOUTH PRIMARY SCHOOL

GENERAL CONSENT FORM

CHILD'S NAME: **ROOM NO:**

PARENT / CARE GIVER NAME:

Schools often need to seek parental permission to cover a wide range of activities and situations. We hope that by placing most of the potential situations on one sheet it will save time and paper.

Please read, sign and return to the office. Thank you.

PERMISSION TO ACT IN THE EVENT OF A MEDICAL EMERGENCY

In the event of a medical emergency, I hereby give permission for the school to take the appropriate action (including calling an ambulance if necessary).

Signed:

RECEIVE NEWSLETTER BY EMAIL or SKOOLBAG APP

I wish to receive the fortnightly newsletter by email.

Email address

SkoolBag App (Please Tick)

Signed

PERMISSION TO VIEW DVD's

I CONSENT to my child viewing DVD's which are rated – (F) Family, (G) General and (PG Parental Guidance). I understand that PG DVD's would be previewed by a staff member to check suitability for class use.

Signed:

SCHOOL YARD SUPERVISION

I UNDERSTAND that the school yard is supervised from 8.30am until 3.45pm and that the school can not accept responsibility for children in the yard outside of these times.

Signed:

PERMISSION TO PARTICIPATE IN LOCAL EXCURSIONS

I CONSENT to my child taking part in local excursions during the school year for educational purposes, when no costs are incurred (eg bus trip to the Art Gallery). Parents will be notified in advance of the local excursion where possible. This may include travelling in private cars, covered by third party insurance, with known and screened parents/staff.

Signed:

UNIFORM & HAT POLICY

The school has a compulsory uniform policy requiring students to wear clothing as accepted by the Governing Council and listed on our Parent Handbook. Wide brimmed or bucket school hats are compulsory in Term 1 & 4 or when the UV rating is over 3.

The school may at times provide loan uniform items to ensure your child is following the policy.

Signed:

Please Turn Over

PERMISSION TO INSPECT FOR HEAD LICE

The South Australian Health Commission recommends that everyone checks their hair regularly for head lice. Checking and treating children’s hair is **BY LAW A PARENT’S RESPONSIBILITY.**

I GIVE permission for the school staff to arrange for a health professional or staff member to check my child’s hair for eggs and head lice. I understand any such check will be conducted sensitively.

Signed:

OR

I DO NOT give permission for the school staff to check my child’s hair for head lice. I will do this. I understand that my child can be excluded from school if staff believe he or she may have lice. I understand it is my responsibility to arrange collection of my child from school when notified. I understand that I may have to provide a letter from a general practitioner to say my child is free of head lice.

Signed:

SCOOOL BEHAVIOUR MANAGEMENT

The school has a agreed Code of Conduct. This features restorative justice practices and develops student accountability for behavioural choices made. It involves steps which may lead the student to contact home if required.

I UNDERSTAND the school had a Code of Conduct and accept responsibility to support the steps involved. (A copy of the policy is available from the office and on page 8 of the Parent Handbook)

Signed

PERMISSION FOR LOTTERIES/RAFFLES

I DO give permission for the school to send home books of raffle tickets, to be sold for various school fundraising activities. I am aware that a child under 15 years of age cannot sell lottery/raffle tickets unless accompanied by and under the supervision of an adult. I am also aware that tickets cannot be sold door to door on any day before 9am or after 8pm or sunset (whichever last occurs).

Signed:

OR

I DO NOT give permission for the school to send home books of raffle tickets, to be sold for various school fundraising activities.

In Lieu of selling raffle tickets I will donate \$..... (enclosed) towards the fundraising target.

Signed: