

EAST ADELAIDE SCHOOL
ORIENTEERING CHAMPIONSHIPS



TITLE OF THE EVENT: 2018 Orienteering Championships

YEAR LEVEL: Selected Students

DESTINATION: The Paddocks Reserve, Bridge Rd, Para Hills West

DAY/DATE: Monday 21 May 2018

TRANSPORT: Bus

DEPARTURE & RETURN TIMES: Meet outside the EAS Gym at 8.30am. The bus will depart at 8.40am. Return to East Adelaide School at approximately 2.45pm.

COST: \$17.50 (GST FREE) to be paid by Friday 4 May 2018 via Qkr! or at the Cashier/Uniform Shop

TEACHERS INVOLVED: Catherine Watkins

ADDITIONAL INFORMATION:

Please ensure that Catherine is informed if your child requires medication whilst on the excursion. The necessary medication must be in the original container, clearly marked with the child's name and with the appropriate health care plan. If the school holds medication and a current health care plan for your child, this will be provided to the supervising teacher for the excursion. Students who self manage their asthma must take their inhalers on the excursion.

Orienteering SA has strict guidelines. Unless competing, students are to remain with their school under Catherine's supervision. Parents are most welcome to attend.

We will **require at least 3 parents** to assist with supervision. The DECD volunteering policy has recently changed. Parents or guardians who volunteer in connection with an activity that involves their own child do not require a *relevant history screening* through the Department of Communities and Social Inclusion [DCSI]. However, East Adelaide School Governing Council has strongly recommended the DCSI screening continues for all volunteers. Only the DCSI screening is acceptable and application forms can be obtained from the school front office. Completed forms must be returned to the school for lodging.

Volunteers are required to have completed the Responding to Abuse and Neglect – Education and Care (RAN-EC) training prior to undertaking any volunteer work. The training may be completed online. Register at <https://www.plink.sa.edu.au/pages/signup.jsf> and select the course "Responding to Abuse and Neglect-Education and Care online induction session for volunteers". Once completed, please provide a copy of your certificate of completion to the school. Should you require further information, please contact the school front office.

Please complete and return the slip below if you are able to help with supervision. Catherine will contact parents to confirm arrangements prior to the event.

Students must have written permission for excursions to be able to participate. Please return the following to the Cashier/Uniform Shop by Friday 4 May 2018.

- Completed consent form
- Offer of volunteer supervision form
- Payment of \$17.50 via Qkr! or at the Cashier/Uniform Shop.

Students must have **written** permission for excursions to be able to participate.

EAST ADELAIDE SCHOOL –ORIENTEERING CHAMPTIONSHIPS EVENT - OFFER OF VOLUNTEER SUPERVISION

EVENT: 2018 Orienteering Championships

DATE: Monday 21 May 2018

NAME of Child _____ Room No _____

- I am able to help with supervision.
- I have a current DCSI relevant history screening.
- I have completed the Responding to Abuse and Neglect (RAN) training and have provided a copy of my certificate of completion to the school.

(Parent/Guardian Name)

(Signature)

Phone Number _____

Date _____



CONSENT FORM FOR CAMP/EXCURSION

(To be completed in conjunction with medical information and activity information sheets)

Please use block letters when filling out this form

As a parent/guardian of:

STUDENT/CHILD'S NAME	
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I:

PARENT/GUARDIAN NAME	
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give my consent for him/her to participate in:

NAME OF ACTIVITY	Orienteering Championships 2018 – Payment of \$17.50 via Qkr! or at the Cashier/Uniform shop
REASON FOR AND DESCRIPTION OF ACTIVITY	East Adelaide School representation at the 2018 Orienteering Championships

at/on:

LOCATION	The Paddocks Reserve, Bridge Rd, Para Hills West
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FROM:

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 TO:

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 OR ON:

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The school/preschool will use the student's current Health Care Plan unless otherwise instructed.

Has a current Health Care Plan been provided to the school/preschool? Yes No

If No, please provide an updated Health Care Plan to the school/preschool on completion of this form. ↴

Details of **planned activities, transport arrangements, anticipated number of students/children and supervising teachers/instructors** are provided on the information sheet attached.

Agreement

- I agree to delegate my authority to supervising teachers/instructors. Such supervisors may take whatever disciplinary action they deem necessary to ensure the safety, well-being and successful conduct of the students as a group and individually.
- In the event of an accident or illness and contact with me being impracticable or impossible, I authorise the teacher-in-charge to arrange whatever medical or surgical treatment a registered medical practitioner considers necessary. I will pay all medical and dental expenses incurred on behalf of my child.
- I have also attached additional or updated health care information, including details of any additional health support he/she requires to undertake the above activities safely. I also consent to my child's doctor or medical specialist being contacted in an emergency.
- The information given is accurate to the best of my knowledge.

Signed: _____

Date: / /

Emergency Contacts - Parent/Guardian

NAME			
ADDRESS			
		POSTCODE	
HOME TELEPHONE	WORK TELEPHONE	ALTERNATIVE TELEPHONE	

Student Medic Alert Number (If applicable):	
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*Any health care information provided is not intended to prevent your child participating unless specific medical advice warrants exclusion. The health care information you supply to the school/preschool will be treated confidentially. Such information is sought in order to protect and assist the student so the activity may be a safe and enjoyable experience. Please contact the teacher-in-charge if you wish to discuss any health care problems.