

June 8th 2018

Dear Parent/Carer

Your daughter has expressed interest in playing netball in the Vicki Wilson Cup on Thursday 2nd August 2018. The competition will be held at the Sunshine Coast Netball Association grounds.

Activity details:

Details in regards to pools, draw, starting times etc will be sent out before the end of Term 2, however some important details are below:

- Registration, player fees and First Aid is \$12 per player
- Dress code - girls will be provided with a NDSHS netball dress that needs to be returned after the carnival (students who do not return the dress will be invoiced for the amount of \$60)
- The canteen will be running for the day
- Transportation – school mini bus and option to organise own transport
- Students will need to bring water bottle, hat and sunscreen.

Activity Costs:

Students must be in financial good standing (Student Resource Scheme (SRS) fees up to date or entered a payment plan) to participate in the excursion. If you wish to discuss a payment plan please contact the Business Services manager on 5472 2222 for enquiries.

Refund policy: Please note some excursion payments are non-refundable due to the nature of pre-payment of the event. If a parent/carers wishes to apply for a refund due to non-participation, please complete a 'Request for Refund' Form from Client Services.

- Registration, player fees and first aid \$12 per player

If you wish for your child to participate in the activity, please complete this consent form and return all pages (including this page) to:

Mrs Thornley in H block staffroom

For further information about the activity, please contact Sarah Thornley on 54722222.

Yours sincerely



Sarah Thornley
Year 11 Coordinator/Netball Coach
Noosa District State High School



Stacy Wilmore
Deputy Principal
Noosa District State High School

Privacy Notice

The Department of Education and Training 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 s.426 of the Education (General Provisions) Act 2006 (Qld) and the Information Privacy Act 2009 (Qld).

The information will not be disclosed to any other person or agency unless it is for a purpose stated above, the disclosure is authorised or required by law, or you have given DET permission for the information to be disclosed.

Activity Risks & Insurance

The activity outlined above carries an inherent risk of physical injury occurring. Please note that the Department of Education and Training does not have personal accident insurance cover for students. If your child is injured as a result of an accident or incident, 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 be 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.

Please complete the required information and check all appropriate boxes below to indicate your agreement/consent:

- 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 of Education and Training does not have personal accident insurance cover for students.
- I give consent for my child, _____ (print child's name) in class _____ (print class details), to participate in the activity detailed above.
- I agree to pay to the school the costs detailed above for my child's participation in the activity.
- In the event of an accident or illness, I authorise school staff to obtain or administer any medical assistance or treatment my child may reasonably require, including contacting my child's doctor.
- I have provided the school all relevant details relating to my child's medical or physical needs on enrolment and where relevant have updated this information.
- I accept liability for all costs incurred in obtaining such medical assistance or treatment (including any transportation costs) and undertake to reimburse the State of Queensland (via the Department of Education and Training) the full amount of any costs incurred on my child's behalf.

Parent/Carer Name: _____ (Please Print)

Parent/Carer's Signature: _____ Date: ____/____/____

Additional medical information

The school collected medical information about your child at enrolment. This information is stored in OneSchool. Please give full details of any new or changing conditions (medical, physical or management) which may affect your child's full participation in the activity described in the form.

You may also wish to provide the following information*:

Name of child's medical practitioner: _____ Telephone No.: _____

Medicare No.: _____

Private Health Insurance Company (if provided): _____ Membership No.: _____

*If an enrolment form for your child has been completed or updated since October 2012 this information will already be recorded in OneSchool.

- I would like this additional information about my child's medical and physical details to be recorded in OneSchool records.