



Macleod College  
A State Prep - Year 12 School  
'Inspiring And Supporting Every Child'

## PARENT CONSENT FORM FOR SCHOOL COUNCIL APPROVED CAMPS & EXCURSIONS

### Parent Consent

**Name of school:**  
MACLEOD COLLEGE

**Title of excursion:**  
**2022 Year 7 Valley Homestead Camp**

**Educational purpose of the program:**

Build collaboration between students and teachers as part of the Year 7 Transition Program.

**Details of supervising staff:**

Year 7 Student Managers, Assistant Principal Michelle Wallis and teaching staff (TBC).

**Costs:**

\$330

**Name and contact details of the 24-hour school emergency contact:**

Camp onsite duty mobile phone – 0431 704 348

**Departure details**

8.30am Wednesday 9<sup>th</sup> March 2022.

**Return details**

Arrive back at Macleod College - 3.30pm – 4pm. Friday 11<sup>th</sup> March 2022.

**Distance from expert medical care:**

Valley Homestead Camp is in close proximity to Alpine Health Hospital, Myrtleford, 10.92 km.

**Accommodation arrangements:**

Ensuted Bunk Rooms.

**Travel arrangements:**

Students and staff will travel to and from camp in an air-conditioned coach with seat belts. There will be at least one staff vehicle on site at all times.

**Adventure activities to be undertaken or that may be offered to students throughout the program:**

To be confirmed with Valley Homestead.

**Activities within this program present the potential for students to sustain physical injury. The following procedures will be implemented – along with other strategies – to manage the potential risks in the program.**

Valley Homestead Camp is a fully accredited and operated by qualified staff who will supervise all activities involving risk.

**A risk management plan for this program has been developed by the Valley Homestead Camp for all activities managed by the camp and Macleod College has a risk management plan for travel and is available for parents to review on request.**

**Attachments**

Medical form

**Student behaviour**

'I understand that in the event of my son's/daughter's misbehaviour or behaviour that poses a danger to himself/herself or others during the excursion, he/she may be sent home. I further understand that in such circumstances I will be informed and that any costs associated with his/her return will be my responsibility.'

**Student illness**

'I understand that in the event excursion staff determine it is necessary for my child to be sent home early due to illness, any cost associated with his/her return will be my responsibility.'

**Cancellations or Alterations**

'I understand that the principal may need to cancel or alter excursion arrangements at short notice, for safety reasons or due to circumstances beyond the control of the school, and while the principal will try to minimise inconvenience or financial losses to parents, these may be unavoidable.'

**Consent for emergency transportation**

'In the event of an emergency I consent to my child being transported in a privately owned vehicle driven by a member of the supervisory staff listed above.'

**ICT/Photograph consent**

'I agree to my child using the Internet and computer network in accordance with the same Internet student users agreement that applies at their current school.' [Strike out if you do not consent]

'I also consent to my child being photographed and/or visual images of my child being taken during activities by the school for use in the school's publications, school's website or for publicity purposes without acknowledgment and without being entitled to any remuneration or compensation.' [Strike out if you do not consent]

**Student Accident insurance**

The Department of Education and Training does not provide student accident cover. Parents may wish to obtain student accident insurance cover from a commercial insurer, depending on their health insurance arrangements and any other personal considerations.

Please cut and return signed consent to school.

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**Parent Consent**

I have read all of the above information provided by the school in relation to the 2022 Year 7 "Valley Homestead Camp", including any attached material.

I give permission for my daughter/son \_\_\_\_\_ (full name) to attend.

Parent/carer: \_\_\_\_\_ (full name)

\_\_\_\_\_ (signature) \_\_\_\_\_ (date)

In case of emergency I can be contacted on:

\_\_\_\_\_ OR:

\_\_\_\_\_

**Note:** Parents should also complete the 'Confidential medical information for school council approved school excursions'.