Inter-School Visit Friday 23rd May 2014

The Principal
Wandin Yallock Primary School

I give permission for my child ___________________________Grade___________ to attend Don Valley Primary School for Inter-School Sports on Friday 23rd May 2014, travelling by private car, departing at 12.15pm and returning at approximately 2.30pm.

I authorise the teacher in charge where it is impracticable to communicate with me to consent to the child receiving such medical or surgical treatment as deemed necessary.

☐ I will be transporting my own child.

☐ My child will need transportation please.

☐ I will be transporting students and I have met the Department of Education’s requirements.

Signed:_____________________________________(Parent/Guardian)

Date:_____________________________ Contact Tel. No. _______________________

This confidential consent form asks for personal information about your child as well as family members that provide care for your child. All staff at Wandin Yallock Primary School and the Department of Education & Early Childhood Development are required by law to protect the information provided by this consent form.