

Consent Form

It is a mandatory requirement that all students attending a ELMPSSA trial or as a member of a zone team to submit this **completed** and **signed** consent form to the convener or team manager on arrival at the event.

Students can obtain the consent form from the school sport’s coordinator. If students are attending in an ELMPSSA team, they will fill in

Please complete all fields (including name and date/s of event).

1. Event details

| Name of event | Date/s of event |
| --- | --- |
| HUNTER PSSA BOYS SOCCER TRIAL | Thursday 11th May 2023Lake Macquarie Football Facility13 Park Rd, Speers Point NSW 2284 |

2. Student details

| Name of required student details | Insert required student details |
| --- | --- |
| Full name |  |
| Date of birth |  |
| Age this year |  |
| Female/male |  |
| School name |  |
| School year/grade |  |

3. Student medical details

| Name of required student medical details | Insert required student medical details |
| --- | --- |
| Medicare number |  |
| Medicare expiry date |  |
| Does you child/ward have private health insurance? Yes/No |  |
| Private Health Provider/Health Insurance number |  |
| Date of child’s last tetanus injection |  |
| List of child’s allergies |  |
| Does your child have an ASCIA action plan?Yes or no?(If yes, a copy must be attached to this form) |  |
| Has your child suffered a head injury/concussion in the last 10 days? Yes or no?If yes, a medical clearance must be attached. |  |

Please detail any medical or special needs which the convener should be aware of, including any behaviour management or other specialised plans (copies of plans to be attached).

4. Concussion Clearance

The Australian Medical Association recommends students being symptom free of concussion for 14 days before returning to sport.

* If your child/ward sustains a concussion, or experiences any concussion symptoms, in the 14 days period prior to the event commencing, you must report this to team officials, and a medical clearance is required in order for your child/ward to participate in the event.
* Medical clearances can be attached to this consent form or can be submitted to team officials separately.

5. Important information

In the event of injury, no personal injury insurance cover is provided by the NSW Department of Education for students in relation to school sporting activities, physical education lessons or any other school activity. The department’s public liability cover is fault-based and limited to breaches by the department of its duty of care to students that may result in claims for compensation.

Parents and caregivers are advised to assess the level and extent of their child’s involvement in the sport program offered by the school, school sport zone, region and state school sport associations when deciding whether additional insurance cover is required, prior to their child’s involvement in the program. Personal accident insurance cover is

available through normal retail insurance outlets. Parents who have private ambulance cover need to check whether that cover extends to interstate travel and make additional arrangements as considered appropriate.

The NSW Supplementary Sporting Injury Benefits Scheme, funded by the NSW Government, provides limited cover for serious injury resulting in the permanent loss of a prescribed faculty or the use of some prescribed part of the body. The Supplementary Scheme does not cover medical expenses or dental cost.

6. Privacy notice

The personal information provided on this permission note will be used and disclosed by the Department of Education for general administration, communication with parents or caregivers and matters relating to the health, safety and welfare of your child in connection with your child’s participation at this event or for any other purpose required or permitted by law. The provision of this information is voluntary but your child may not be able to participate if it is not provided. This information will be held securely and disposed of securely when no longer needed. You may correct personal details recorded on the form at any time by contacting the convener.

7. Publishing student information

The Department of Education may publish or disclose information about your child for the purposes of sharing his/her experiences with other students, informing the school and broader community.

This information may include your child’s name, age, information collected during this event, such as photographs, sound and visual recordings of your child.

The communications in which your child’s information may be published or disclosed include, but are not limited to:

• Public websites of the Department of Education including the School Sport website at **app.education.nsw.gov.au/sport.**

• Department of Education intranet (staff only), blogs and wikis.

• Department of Education publications including the school newsletter, annual school magazine and school report, promotional material published in print and electronically, including on the department’s websites.

• Official department and school social media accounts on networks such as YouTube, Facebook and Twitter.

• Local and metropolitan newspapers and magazines and other media outlets.

Parents should be aware that when information is published on public websites and social media channels, it can be linked to by third parties and may be discoverable online for a number of years, if not permanently. Search engines may also cache or retain copies of published information.

Permission to publish from parent/caregiver

I have read the information about disclosing and publishing student information above and—

☐**I give permission**  ☐**I do not give permission** for the Department of Education to publish and disclose information about my child in publicly accessible communications. This permission remains effective until I advise otherwise.

Name and signature of parent/caregiver \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: ­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

8. Parent/Caregiver details and consent

| Name of requiredparent/caregiver details | Insert required parent/caregiver details |
| --- | --- |
| Full name |  |
| Home address |  |
| Mobile phone number |  |
| Home phone number |  |
| Work phone number |  |
| Email address |  |

* I have read the information issued and I hereby consent to my child participating in this event.
* I understand that teachers will provide supervision at the event.
* I understand that transport to and from the event is my responsibility and that the arrival and departure arrangements are also the responsibility of the parent/caregiver unless otherwise specified.
* In the event of any accident or illness, I authorise the obtaining of, on my behalf, an ambulance and any such medical assistance that my child may require. I accept full responsibility for all expenses incurred.
* To assist team management at the event and to the best of my knowledge, my child has no medical condition or injury that places them at risk in participating in this sport activity.

Name and signature of parent/caregiver \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date:

9. Principal’s declaration

* I certify that the student whose details appear on this form is enrolled at this school.
* I have verified that the date of birth as stated on this form is correct.
* He/she has the school authority to represent on this occasion.
* A copy of this consent form will be retained by my school.
* I certify this student has/has not parental/caregiver permission to publish as stated in the ‘Publishing student information’ section 5 above

Name and signature of principal \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_

Date:

Name and signature school sport’s coordinator \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date

10. Code of conduct for students, teachers, coaches and spectators

* The goals of the game are to have fun and improve skills. Be modest in success and generous in defeat.
* Play for the fun of it.
* Play by the rules and always respect the decisions of officials. If there is a discrepancy notify the sport coordinator of the school and allow them to deal with situation.
* Make no criticism either by word or gesture. Deliberately distracting or provoking an opponent or player is not acceptable or permitted in any sport.
* Be a good sport. Applaud good performance and effort from all individuals and teams. Congratulate all participants on their performance regardless of the game’s outcome.
* Condemn unsporting behaviour and promote respect for opponents.
* Condemn the use of violence in any form.
* Respect the rights, dignity and worth of all participants regardless of their gender, ability, culture background or religion.
* Place the safety and welfare of the participants above all else.
* All school sport events are alcohol and smoke free zones.

**I have read the above Code of Behaviour and agree to abide by this code to the best of my ability.**

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student Signature

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent Signature

Please be aware that breaches of the above code may result in you being asked to leave an event.

Thank you for complying with this code so a safe and respectful sport environments are created for all students, parents and spectators.