Consent form for Camps, Excursions, Sporting or Adventure activities

This form applies to all Department for Education settings including schools, preschools, and early childhood services.



Dear parent/carer

Open Access College has organised the excursion/camp detailed below. If you would like your child to attend, please complete and return the parental consent form on page 2. You can keep page 1 for your future reference.

If you do not consent to your child participating in this excursion/camp, an alternative plan will need to be negotiated with the site for the duration of the activity.

See Camps and excursions policy (education.sa.gov.au) for more information

Activity information

Excursio	n or camp: Cr	afternoo	on								
Location: Open Access College Marden, 1 – 37 Marden Road, Marden SA 5070 – Room: Boardroom North											
From:	18 02	2	2025	То:	25	11	2025	Or on:			
Educatio	onal purpose o	of the pr	rogram a	nd activit	ties to be	undertak	en:				
building various We will Whethe	oons is a grou valuable life s crafts while de be meeting tw r it is improvir working on te	kills three evelopin vice a te og your s	rough cra ng essent erm, and social ca	ift activiti ial skills t each sess pacity, bu	es. Our g hat will b sion will f uilding res	oal is to pr enefit you ocus on a silience, m	rovide a sp i in your p different o anaging y	bace whe ersonal a craft that our time,	re you ca nd acade relates to developi	n engage i mic life. a specific ng conver	in c skill. rsation
skills, or working on teamwork, we have carefully selected crafts that will help you grow and develop as an individual. Date: Tuesday 18 th February 2025, Tuesday 25 th March 2025, 20 th May 2025, Tuesday, 24 th June 2025, 5 th August											
2025, 16	^{5th} September,	Tuesda	ay 21 st Oc	tober 20	25 and 2	5 th Novem	ber 2025				
Time: 2:30pm-3:30pm											
	s will need to their way to B m .		-	-				-	-		
To atten	d this event:	Students	s will be	required	to organi	se their o	wn way to	and fron	n Open Ao	ccess Colle	ege.
Clothing	or equipmen	t require	ed for th	e activity	(if applic	able):					
Student	s must bring:	N/A									
Number staff: 2-4	of supervisin 1		mber of a unteers:			nber of ins pplicable)		Adult t 1:7	o child ra:	tio:	
Number	of children at	tending	g: 5-20		I			_1			
Costs/pa	ayment requir	ements	:								
N/A											

Transport arrangements (including departure/arrival times):

To attend this event: Students will be required to organise their own way to and from Open Access College.

Site based contact person and contact details:

Phoebe Ware, Senior Youth Worker, phoebe.ware441@schools.sa.edu.au 8309 3633

Sleeping arrangements (if applicable): N/A

Contingency plans (if the excursion is cancelled or altered):

If the event is cancelled, students, parents and caregivers will be notified at the earliest possible moment and students will be required to attend their normal timetable lessons. Students are required to attend this event in person.

To be completed by parent/carer and returned

Health support

Does your child have any health support or medication administration needs that should be considered for this activity?	Yes	No □
If yes, has a care plan/medication agreement been provided to the school/preschool?	Yes	No □
Are there any other matters that may impact your child's safe participation in the above activities?	Yes	No □
Please outline details:		

Agreement

- Supervising staff/instructors will use the site's behaviour management processes needed to ensure the safety and wellbeing of all students.
- If there is an accident or illness, supervising staff will provide first aid and call an ambulance if required. The school/preschool will inform me as soon as possible. I will cover all medical expenses for my child, but I can ask the department to pay for ambulance costs if my child does not have private ambulance cover.
- Where appropriate, I have provided updated health information for my child, including any extra support they need.
- The information I have given is accurate. The information provided will be used solely for the purpose of ensuring your child's safety during excursions and will be used in accordance with the Information Privacy Principles Instruction.
- I can ask the school/preschool to provide me with a copy of the risk management plan for this excursion/camp if needed.

Parent/carer consent

I have read and agree with all the information provided and give my consent for my child to attend this activity:							
Name of activity	of activity Crafternoon						
Student/child name:							
Parent/Carer:							
Name:							
Signature:		Date:					
Phone number:							
Who can we contact in case of an emergency for the duration of this activity :							
Name:							
Relationship to the child/student							
Phone number/s:							