

FRANCIS GREENWAY HIGH SCHOOL

LAWSON AVENUE BERESFIELD NSW 2322 PHONE: (02) 4964 1282

Dear Parent or Caregiver,

Students have been provided the opportunity for a Colour Run as our Cross Country Carnival on Thursday 11th April 2019.

As there has been some changes with NSW Department of Education Policy, please read the information below.

- 1. The liability waiver below must be signed and returned to school prior to the day (if this is not signed, your child will not be able to participate in the colour run)
- 2. Students must bring and wear protective eye goggles or glasses to be allowed to participate in the colour run (this can be an old pair of sunglasses)
- 3. All electronic devices must be place in a plastic bag on the day to eliminate damage

and Safety Policy as stated by the NSW Department of Education.

4. Students with a respiratory condition, must wear a mask or bandana to cover their face

	_
Ms Harmonie Attwill	Ms Jo Edwards
Head Teacher PDHPE	Principal

- I have been advised that my child is to wear protective equipment that is required by the Health
 - I am aware of the risks, dangers and hazards associated with this type of activity and I freely accept and fully assume all such risks, dangers and hazards and the possibility of personal injury.
 - I confirm that I have read and understood this release agreement prior to signing it, and I am aware that by signing this release agreement I am waiving certain legal rights which I may have against the NSW Department of Education. This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her participation. I release and agree to indemnify and hold harmless the NSW Department of Education from any and all liabilities incident to my child's involvement or participation in these programs as provided above, EVEN IF ARISING FROM THEIR NEGLIGENCE, to the fullest extent permitted by law.

give/do not give permission for	to participate in the colour run on
Thursday 11 th April 2019.	
SIGNED:	Emergency Phone Number:
(Parent/Guardian Signature)	

Medical information form				
You may correct any personal information provided at any time by contacting the school office.				
Student name:		Class:		
Medicare number (optional)				
Parent or caregiver contact	details			
Name:				
Address:				
Home phone:	Work:	Mobile:		
Doctor contact details				
Name:				
Address:				
Doctor's telephone:	1	2		
Emergency contact(s) detail	ls (nominated by the parent or careg	iver as alternate contact)		
1. Name:		Phone:		
2. Name:		Phone:		
List existing medical conditions each.	ions or illnesses (include asthma, dial	betes, epilepsy, allergies etc.). Outline the treatment for		
Outline special dietary need	ds including possible reaction to inap	propriate diet		
Medication(s) to be admini of administration, and any		name of medication, instructions for administration, time		
Signature:		Date:		
		[parent/carer name] is being obtained for the purpose		
[student name] who is currently educational or school activities. It will be used by officers of the	ly enrolled at the school and who may par s conducted by or in conjunction with Frar e NSW Department of Education and Trair	ealth care related needs about rticipate in school excursions, sporting activities or other nois Greenway High School. ning to assist planning, to support students, and to minimise risks		
when conducting school excursions, sporting or other school activities. Other persons or agencies that may be provided with this information include, but are not limited to, volunteers and members of				

school activity; and persons that may be called upon to provide health care treatment or other assistance during or as a consequence of such excursions or activities.

Provision of this information is not required by law. However, a failure to provide the information may mean that your child can not participate in a particular excursion or school activity. In such circumstances the school will make available a sound alternative

external organisations who join with the school or are otherwise involved in the planning or delivery of the excursion, sporting or other

educational experience.

Provision of this information will significantly assist the school in planning a safer educational activity. It will be stored securely. If you

Provision of this information will significantly assist the school in planning a safer educational activity. It will be stored securely. If you have any concerns about provision of this information, please contact the school principal to discuss further. You may correct any personal information provided at any time by contacting the school office.