

Permission Form



Child's Name: _____ DOB: ____/____/____

Please read the following permissions for your child carefully and **circle yes or no** for each question, to authorise before signing.

General

I give permission for my child to:

Have SPF 30+ sunscreen applied prior to sun exposure (if no please provide an alternate sunscreen for educators to apply with a permission slip)	YES	NO
Have insect repellent applied	YES	NO
Be given one dosage of Children's Panadol in the event of my child's body temperature rising above 38°C, after all attempts at contacting authorised persons have been exhausted	YES	NO
Have educators apply First Aid strips (e.g. Band-Aids) on my child, if required	YES	NO
Have educators apply antiseptic cream (e.g. Dettol) on my child, if required	YES	NO

Photos and Video Footage

I give permission:

To take and use photographs of my child in any displays within the service	YES	NO
For photos and video footage of my child to be used in learning stories and to be shared with other families that attend the centre via the centres family communication system	YES	NO
For photos and video footage of my child to be used on The Scots College BASC website and social media pages	YES	NO
For photos and video footage of my child to be used for advertising purposes	YES	NO
For photos and video footage of my child to be used by educators as part of their studies through TAFE, University or other recognised RTOS	YES	NO
For other parents to take photographs at the centre including my child, for example at birthdays, excursions and special occasions, with managements permission	YES	NO
I understand that all information will be treated confidentially, and that my child's full name will not be disclosed with any photography, and that I may exclude any of the specific permissions provided	YES	NO

Leaving the premises

I give permission for The Scots College BASC employee's/educator's to:

Remove my child from the premises in the case of an emergency arising and relocate them to designated safe locations	YES	NO
Remove my child from the premises as part of participation in organised evacuation drills	YES	NO
Walk my child to and from The Early Learning Centre and The Scots College BASC	YES	NO
Walk my child to and from Junior Prep and The Scots College BASC	YES	NO
Walk my child to and from Senior Prep and The Scots College BASC	YES	NO

Medical/Emergencies

In the event that my child requires medical attention, I authorise the employees/educator's of The Scots College BASC to obtain/provide medical assistance to my child	YES	NO
I authorise the employee's/educator's of The Scots College BASC to provide medical treatment for my child, should this be considered necessary	YES	NO
I authorise the employee's/educator's of The Scots College BASC to provide first aid treatment for my child, should this be considered necessary	YES	NO
I authorise the employees/educator's of The Scots College BASC to call 000/Ambulance to seek the required medical/first aid treatment	YES	NO
I agree to pay any medical or transport costs incurred, including ambulance costs	YES	NO

Acknowledgments

I acknowledge that:

My child will be excluded from the centre (as recommended by NSW Department of Health) if suffering from an infectious disease	YES	NO
If my child has not been immunised, in the event of an infectious disease outbreak at the service, my child will be excluded from the centre (as recommended by NSW Department of Health)	YES	NO
It is my responsibility to notify and update BASC in writing about my child's SEA commitments	YES	NO
It is my responsibility to notify and update BASC in writing about my child's collection requirements from SEA commitments	YES	NO

Child participation

I understand that all due care will be taken by The Scots College BASC and that the centre or employee's/educator's will not be held responsible for any loss of or damage to property or injury occurring during the running of the Before and After School Care program unless caused by the proven negligence of The Scots College BASC employee's/educator's?	YES	NO
I approve of my child's involvement in The Scots College BASC program?	YES	NO
I give permission for my child to participate in centre-based activities organised for the days my child will be attending BASC?	YES	NO
I understand that if my child continuously misbehaves after guidance procedures have been followed, I will be notified and my child may be removed from the centre?	YES	NO
I agree that the information I have provided on this form is correct?	YES	NO
I have read the family handbook and agree with and understand that our family will follow all centre policies and procedures	YES	NO

Parent/guardian signature: _____ Date: _____