

ROEBOURNE DISTRICT HIGH SCHOOL

Consent Form

At **Roebourne District High School** we aim to offer your child the widest range of learning opportunities and celebrate learning whenever possible. This may often require some form of parental consent. This form asks you to consent to your child's participation/use/access to several aspects of the school program. At all times we make the very best efforts to exercise exemplary standards in respect of duty of care.

newspapers, on the internet, in newsletters or on film of details are provided. Work/images captured by the spurposes outlined above and will be stored and dispose	hed to recognise excellence or effort and may appear in or video. Their names may also be included but no contact school will be kept for no longer than is necessary for the ed of securely. mage and/or work published as described above. In addition, see Appendix F of the Student's online policy.
abiding by the users' Code of Conduct. Yes, my child has permission to access the inter-	ce with the school policy. Student access is contingent on net in accordance with school policy. addition, see the School's policy and the Student's online policy.
VIEWING CONCENT	
rated and don't require consent. Very occasionally would need parental permission.	taries as part of their learning. Almost always these are 'G' something with a 'PG' rating is appropriate for which we 'PG' rating if deemed suitable by the teacher and school
MEDICAL Children sometimes need basic medical attention i.e. band aids or medicated creams applied to small cuts and wounds. This can be provided by school staff. However if the wound is slightly more serious and needs the attention of a nurse or if your child is sick and the school is unable to contact parents/caregivers he/she will be taken to Mawarnkarra Health Service. Yes, I consent to my child being taken to receive medical attention at Mawarnkarra Health Service. No, I do not give consent.	
Children occasionally walk within the local area for minor excursions under the supervision of the teacher and attend activities in local parks and nature reserves or short excursions in the school vehicle to Point Samson or Cossack. On all occasions, parents will be notified of the local excursion. Yes, I consent to my child participating in teacher supervised local excursions which may involve short outings to and from the school. No, I do not give consent.	
The school also has the Newsletter accessible on the Website.	
lame of student:	Year: Room:
lame of person signing the consent form:	
, v	Surname:
Title: First Name:	Juinaine

Please indicate relationship to the student (e.g. parent/guardian/responsible person): _