Eacham Street PETRIE QLD 4502



# Telephone: (07) 3481 4333 Fax: (07) 3481 4300

Activity Consent Form - Book Week 2020: Author Visit: Years P- 3

9 October 2020

#### Dear Parent/Carer

On Tuesday 20 October 2020, we will be celebrating Book Week 2020 with a visit from author Cori Brooke, as part of our Book Week celebrations and library program. The aims of the activity are to foster school enthusiasm for reading, literature and writing, which commonly results when an author comes to speak to students in person. Authors foster a love for reading and also promote a passion for writing.

#### **ACTIVITY DETAILS:**

This year, well-respected children's author Cori Brooke will share her expertise with our students in years Prep to 3. Cori loves writing and she is passionate about picture books and their ability to drive and encourage the imagination and creativity of both children and adults. She also spends a lot of time at the beach, loves cooking and collecting antiques, especially old watches. https://coribrooke.com.au/

**DATES:** Tuesday 20 October 2020

**VENUE:** Kurwongbah State School Hall

**SESSION TIMES:** Throughout the school day, each session will run for 45 minutes.

**STUDENTS CAN BRING:** Any privately owned copy of the author's books for signing on the day. There will be

an opportunity for you to purchase one of the author's books from the library.

Class teachers will attend sessions, with Teacher Aides if required. **SUPERVISORS:** 

**RISK LEVEL:** Low risk activity. Students will be supervised in the school hall and follow COVID-19

auidelines.

### **ACTIVITY COSTS: \$3.00**

Kurwongbah State School is a cashless school. Preferred payment method is BPOINT (using the BPOINT link on the invoice emailed to you). Payment can also be made by QParents, EFTPOS or Cheque/Money Order (payable to Kurwongbah State School). Payment must be made by Friday 16 October 2020. No late payments can be accepted.

#### **REFUND GUIDELINES FOR ACTIVITIES:**

At Kurwongbah State School we are committed to providing a safe and supportive learning environment for students, staff and volunteers. This commitment includes the health and safety of staff and students when conducting curriculum activities in the school or in other locations.

School excursions and camps enhance a student's learning by providing opportunities for the student to participate in activities, both curriculum-related and recreational, outside the normal school routine. All planned school excursions are approved by the Principal and endorsed by the Parents and Citizens Association.

State schools are able to charge a fee for:

- An educational service including materials and consumables not defined as instruction, administration and facilities for the education of the student;
- An education service purchased from a provider other than the school where the provider charges the school; and
- A specialised educational program.

A school fee is directed to the purpose for which it is charged.

School fees for excursions and camps are calculated on a cost recovery only basis, according to the number of students who have indicated their attendance.

Participation of students in an excursion or camp is indicated through payment of the excursion or camp fee and provision of a permission form completed by the parent/carer.

As the school budget cannot meet any shortfalls in funding for an excursion or camp due to the subsequent non-participation of a student who had previously indicated attendance of the activity, fees already paid for an excursion or school camp may be refunded in full or in part or not at all, having regard to the associated expenses incurred and the circumstances of the non-participation.

If a parent/carer wishes to apply for a refund due to their child's non-participation in an excursion or camp activity, they may do so by completing a Request for Refund form available from the school office. Where possible, the request should include the receipt relating to the payment for which a refund is being sought.

If you wish for your child/student to participate in the activity, please complete this consent form and return to your child's class teacher for collation.

For further information about the activity, please contact Kat Turner on 3481 4333.

Yours sincerely

**Leanne Odorico**Acting Principal
Kurwongbah State School

Kat Turner Teacher Librarian Kurwongbah State School



Please return this form to your School Office by Friday 16 October 2020.

## Activity Consent Form - Book Week: Author Visit - Cori Brooke Years P-3

#### Privacy notice

The Department of Education is collecting the personal information requested in this form in order to:

- obtain lawful consent for your child to participate in the activity;
- help coordinate the activity;
- respond to any injury or medical condition that may arise during, or as a result of the activity; and
- update school records where necessary.

The information will only be accessed by authorised school staff and will be dealt with in accordance with the confidentiality requirements of, as applicable, s.426 of the Education (General Provisions) Act 2006 (Qld), the Information Privacy Act 2009 (Qld), and/or the Privacy Act 1988 (Cwlth).

The information will not be disclosed to any other person or agency unless the disclosure is authorised or required by law, or you have given the department permission for the information to be disclosed.

#### Activity risks and insurance

Please note that the Department of Education does not have personal accident insurance cover for children/students. If your child is injured as a result of an accident or incident while participating in the activity, all costs associated with the injury, including medical costs are the responsibility of the parent/carer. Some incidental medical costs may be covered by Medicare. If you have private health insurance, some costs may also be covered by your provider. Any other costs must be covered by parents/carers. It is up to all parents/carers to decide what types and what level of private insurance they wish to arrange to cover their child. Please take this into consideration in deciding whether or not to allow your child to participate in this activity.

#### Consent

By signing this form I agree that:

- I have read all of the information contained in this form in relation to the activity (including any attached material) and I am aware that the department does not have personal accident insurance cover for students/children.
- I give consent for my child, \_\_\_\_\_\_ in class \_\_\_\_\_, to participate in the Book Week: Author Visit activity on Tuesday 20 October 2020.
- I will pay to the school the costs detailed in this consent form for my child's participation in the activity.
- In the event of an accident or illness, school staff may obtain or administer any medical assistance or treatment my child may reasonably require, including contacting my child's doctor.
- I accept liability for all reasonable costs incurred by the department in obtaining such medical assistance or treatment (including any transportation costs) and undertake to reimburse the department the full amount of those costs.
- I have provided the school all relevant details of my child's medical or physical needs on registration /enrolment and where relevant have updated this information.

| Parent/Carer's name:  | (Please print |
|---|---------------|
| Parent/Carer signature:   | Date://       |
| Additional medical information  The school collected medical information about your child at registration/enrolment. This information about your child at registration/enrolment. |               |
| electronically in OneSchool. If there is any new or updated medical information, please contact Change of Details Advice Form prior to the activity.  **                          |               |
| KURWONGBAH STATE SCHOOL - CREDIT CARD PAYMENT SLI Please charge my:   Visa   Master Card  |               |
| Credit Card Number:   |               |
| Expiry Date: Amount: \$   |               |
| In payment of: Book Week Author Student Name:   |               |
| Cardholder's Name: Cardholder's Signature:  |               |