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ABN 36 642 680 210

Beenleigh SHS Rugby League Academy Year 6 Trial Day **Activity Consent Form**

10th July, 2024

Dear Parent/Carer,

Your son/daughter is invited to attend the Beenleigh SHS Rugby League Academy Year 6 Trial Day. The trials will be held at Beenleigh SHS. Students will spend the afternoon rotating through groups, getting to know the values of the academy and playing games. Games will be under the NRL Safe Play Code. The purpose of the day is to have students' trial for the 2024 Year 7 Rugby League Academy, provide an insight into the academy we offer here at Beenleigh SHS and to select excelling students to receive a scholarship in 2024 for Beenleigh SHS Rugby League Academy.

Students participating will be eligible for the following:

- Full School Scholarship which includes all school fees, Rugby League Academy uniform and fees.
- Rugby League Scholarship which includes all Rugby League Academy fees.

If you have any questions, please don't hesitate to ask the school.

Activity details:

Date:	Thursday 18 th July, 2024	
Location:	Beenleigh State High School – Rugby League Field	
Transport:	Students to make their own way to and from the school	
Time:	3:15pm – 5pm	
Staff:	Qualified and Experienced Teachers & Coaches	
Inherent risk level of the activity:	High	
What the students will be doing:	Activities could include:	
	Competitive Full Contact Rugby League Drills	
	Competitive Full Contact Rugby League Gameplay	
Items to bring:	Boots, Rugby League Shorts, Water Bottle, Towel & Protective Equipment	

If you wish for your child to participate in the trial afternoon, please complete the attached consent form and return all pages to Mr Daniel Selff at Beenleigh SHS either via emailing at dself5@eq.edu.au, handing the completed form to Beenleigh SHS Admin Office or simply by bringing the completed permission for with you in the afternoon to the trial.

Mr Matthew Morgan Principal

Mr David Roberts

HOD – Health, Physical Activity & Sport



























Activity Consent Form Beenleigh SHS Rugby League Academy Year 6 Trial Day

Privacy Notice

The Department of Education and Training (DET) 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 confidentially requirements of, as applicable, s.426 of the Education (General Provisions) Act 2006 (Qld) and 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 it is for a purpose stated above, the disclosure is authorized or required by law, or you have given DET 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 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.
- , to participate in the I give consent for my child. Beenleigh SHS Rugby League Academy Year 6 Trial Day.
- 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 /enrolment and where relevant have updated this infor 	
Parent/Carer's name:	(Please print)
Parent/Carer's signature:	Date:/
	w or updated medical information which may affect your
You may also wish to update/provide the following option	
Name of child's medical practitioner:	Telephone No:
Medicare No:	
Private Health Insurance Company (if applicable):	Membership No:
*If a registration/enrolment form for your child was completed or updated sin- will already be recorded in OneSchool.	ce October 2012 and these details have not changed, this information
I would like this additional information about my child's me	dical information to be recorded in OneSchool records.