Schools often need to seek parental permission to cover a wide range of activities and situations. We hope that by placing most of the potential situations on one sheet it will save time and paper. Please read, sign, date and return to the class teacher ASAP. Thank you.

FAMILY NAME: __________________________________________

PERMISSION TO ACT IN THE EVENT OF A MEDICAL EMERGENCY

In the event of a medical emergency, I hereby give permission for the school to take the appropriate action (including calling an ambulance if necessary).

Signed_______________________________

PERMISSION TO BE PHOTOGRAPHED

I give permission for my child to be photographed (by still or video camera) whilst attending Cadell Primary School, either individually or in groups whether the photograph be taken for school purpose eg. School assembly, camps, excursions, class activities, intranet or be a commercial photographer selected by the school. My child’s photo may be published in the local papers—River News, Murray Pioneer or BCM Triangle. Photos of students will NOT be placed onto our school website. I understand that this general consent does not commit me to accept, with a view to purchase any photograph that may be subsequently taken of my child.

Signed_______________________________

CHRISTIAN PASTORAL SUPPORT WORKER

I give permission for my child to speak with and obtain support from the appointed Pastoral Support Worker if the need so arises.

Signed_______________________________

SCHOOL YARD SUPERVISION

I understand that the school yard is supervised from 8.30am until 3.30pm and that the school cannot accept responsibility for children in the yard outside of these times.

Signed_______________________________

iPAD AGREEMENT

I have read the Guidelines for iPad use and understand this signed agreement will be kept on file at the school. This document is available on our school website ~ www.cadellps.sa.edu.au.

Signed_______________________________

CHRISTIAN OPTIONS

Christian Options (one hour session per term) focus on practical life skills such as patience, telling the truth, self-esteem & confidence. They explain what Christians believe and what their beliefs mean to their lives.
I give permission for my child(ren) to attend Christian Seminars while attending Cadell Primary School.

Signed_______________________________

PERMISSION TO PARTICIPATE IN LOCAL EXCURSIONS

I consent to my child(ren) taking part in local excursion during the school year for educational purpose eg: walks within a 2km radius of the school. Parents will be notified in advance of the local excursion where possible.

Signed_______________________________
PERMISSION TO USE THE INTERNET IN ACCORDANCE WITH OUR INTERNET POLICY

I have read the Cyber-safety Use Agreement (available on our website ~ www.cadellps.sa.edu.au) about appropriate use of the Internet at Cadell Primary School and I understand the consequences which will result from a breach of these rules.

I understand this agreement will be kept on file at the school. Signed_______________________________

SCHOOL WEBSITE/FACEBOOK

I understand that from time to time the school may wish to publish examples of student projects, and other work on the School Web Site or Facebook pages. Our closed Facebook group ‘Cadell Primary Parents and Carers’– only school staff and parents as members can see this page.

I give permission for my child’s work and/or audio presentations (no photos of students) to be published on our website and OPEN Facebook page.

Signed_______________________________

I give permission for my child’s work, audio presentations and photos of students working, activities or on excursions to be published on the CLOSED Facebook page.

Signed_______________________________

HEAD LICE

The South Australian Health Commission recommends that everyone checks their hair every week for headlice. Checking and treating children’s hair is **BY LAW A PARENT’S RESPONSIBILITY**.

☐ I understand and accept that if my child is assumed to be infested I will receive a phone call from the school advising me and I understand that I will need to collect my child promptly. If Headlice are found then my child will be withdrawn from school for treatment by parents or caregivers.

Signed_______________________________

SUNSMART POLICY

I understand that our school is recognised as a Sun Smart school by the Anti Cancer Foundation. I understand that all students need to wear a broadbrimmed/legionnaires/bucket hat and apply supplied sunscreen while outside.

Signed_______________________________

CODE OF BEHAVIOUR

This Code of Conduct (available on our website) has been negotiated and agreed upon, between students, staff and parents of Cadell Primary School and fits into the framework of the DECS School Discipline Policy. (DECD website)

I have read and acknowledge the school’s Code of Conduct.

Signed_______________________________

PARENT NEWSLETTER

I wish to receive the parent newsletter by:

☐ Email ________________________________ (address)

or

☐ Hardcopy

I am willing to volunteer at the school by:

☐ Listening to reading  ☐ Helping at Mid Murray Sports Day
☐ Covering library books  ☐ Being a member of Governing Council
☐ Supervising swimming  ☐ Helping with gardening
☐ Helping with student committees  ☐ Student lunches/fundraising

Any assistance would be very much appreciated. Thank You.