



Richmond Primary School Consent Forms— 2009

We require parent's consent for a variety of activities throughout the school year. Please complete this proforma and return it to school promptly.

If you do not give your permission for one or more parts of the proforma please clearly indicate this by crossing out the relevant section.

1. During the course of the year, each grade/group within the grade, will be attending local excursions for which a general permission to participate is required.
2. The class liaison parents for each grade often need to contact other parents in their child's class to invite them to participate in some school activities. It is helpful for these parents to have a list of the phone numbers of the parents of the children in the grade. Similarly it is often helpful for other parents to have such a list to facilitate their child's socialising after school. If you are willing to have you phone number published in this way please complete the form below and return it to school promptly.
3. On occasions we require photographs of children for promotional use by the school or within the school. We are also approached by the media for photographs or filming of children doing activities in the school. If you consent to your child being filmed or photographed please complete the form below.

Parent Consent Form—2009

1. I give my permission for my child to attend any local excursion. I also authorise the teacher in charge of the excursion to consent, where it is impractical to communicate with me, to medical treatment as deemed necessary.
2. I give consent for my phone number to be published on a class list for the use of Class Liaison Parents and parents of children in my child's class.
3. I give consent for my child's photograph or school work to be reproduced in publications promoting the school and its educational programs and activities. This may include school publicity materials, local and national newspapers, magazines, school web site and other electronic media where appropriate.

Student Name: _____

Parent Name: _____

Parent Signature: _____

Date: _____