

# CENTENARY HEIGHTS STATE HIGH SCHOOL

*Safety - Respect - Learning*

22 January 2024

## **SPORT ACTIVITY CONSENT FORM**

**HIGH RISK ACTIVITIES \* SWIMMING, JAVELIN AND DISCUS**  
**TUESDAY AFTERNOON SPORT \* ANDERSON PARK, WALKING, TEN PIN, LASER TAG,  
SWIMMING/WATER POLO, FITLAB, WEIGHTS**

Dear Parent/Carer

Throughout 2024, your child will be required to be involved in various aspects of our school sport program. These aspects include:

- Tuesday Afternoon sport
- Annual Swimming, Cross Country and Athletics Carnivals
- Extra-Curricular sport

These aspects of our school sport program aim to provide all of our students with the opportunity to participate across a range of activities that focus on improving personal performance and participation, skill development and provide choices for participating in physical activity for life. A number of these activities are considered higher risk than others requiring the completion of consent forms for participation. Activities requiring special consent are outlined below. At our Sport Sort out at the beginning of each term, students select from a variety of options that are based both at school and out of school venues. Out of school venues also require the need for completion of a consent form.

### **TUESDAY AFTERNOON SPORT/CARNIVALS Activity details:**

- Tuesday Afternoon Sport involves a lesson once a week for the school year.
- Swimming Carnival is a one day event at Milne Bay requiring consent to swim.
- Cross Country Carnival is a half day event held at Kearneys Spring.
- Athletics Carnival is a one and a half day event requiring consent for javelin and discus participation.
- Consent forms are required for any out of school sports student choose.
- Swimming, Javelin and Discus are considered high risk activities and require specific procedures to be followed to ensure the safety of themselves and others.
- Sessions involving swimming, javelin and discus will be conducted by qualified HPE teachers who hold current First Aid and CPR Certificates.
- Activities involved with high risk include learning the skill development and technique for safe participation. Ability levels are taken into account.
- To participate in the school swimming carnival, javelin events, discus events and any associated trials and all Tuesday Afternoon Sport out of school sports require consent.

Please complete this consent form and return all pages to your child's Pastoral Care teacher. Students are unable to participate in any of the above high risk activities or out of school sport options without consent. If you have any further questions or concerns, please contact Bec O'Grady on 46367500.

Kind regards



Bec O'Grady



Darren Cook

Education Queensland International CRICOS Provider Number: 00608A



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60 Ramsay Street Toowoomba Queensland 4350  
**Ph:** (07) 4636 7500 **Email:** [info@centheigshs.eq.edu.au](mailto:info@centheigshs.eq.edu.au) **Web:** [www.centheigshs.eq.edu.au](http://www.centheigshs.eq.edu.au)

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## Sport activity consent form

### Privacy Statement

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

- obtain consent for the named child/student to participate in the excursion;
- help coordinate the excursion;
- respond to any injury or medical condition that may arise during or as a result of the excursion; and
- update school records where necessary

The information will only be accessed by authorised departmental staff. The information not be disclosed to any other person or agency unless we have your consent or we are required or authorised by law to do so e.g. in compliance with relevant Queensland Chief Health Officer's Directions.

### Activity risks and insurance

The Department of Education does not have personal accident insurance cover for children/students. If a child/student 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 the parent/carer has private health insurance, some costs may also be covered by your provider. Any other costs must be covered by the parent/carer. It is up to the parent/carer to decide the type/s and level of private insurance they wish to arrange to cover their child. Please take this into consideration in deciding whether or not to allow the child/student to participate in this activity.

### Consent

By signing this form, I agree to all the following statements:

- I have read all the information contained in this form in relation to the activity (including any attached material).
- I am aware that the department does not have personal accident insurance cover for children/students.
- I give consent for the named **child/student** (listed below), to participate in the identified excursion.
- I will pay to the school the costs detailed in this consent form for the child/student's participation in the excursion.
- I agree to and understand the refund policy as it applies to this excursion (see Excursion costs).
- In the event of an accident or illness, school staff may obtain or administer any medical assistance or treatment the child/student may reasonably require, including contacting their 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 with all relevant details of the child/student's medical or physical needs on registration/enrolment and where relevant have updated this information.
- I give consent for student contact information to be shared in relation to this activity in compliance with relevant Queensland Chief Health Officer's Directions.
- I understand that if this activity is extra-curricular (sport, musical, debating etc) my child will not be able to participate if the Student Resource Scheme fees are not paid in full or a Pay by Instalment Plan is not in place and being honoured in line with the conditions of the agreement.

<b>Student Name</b>			<b>PCG</b>
Parent/Carer/ *Student (see below)	Name:		
	Phone number:		
	Email address:		
	Signature:		Date:
Emergency contact information for this excursion	Name:		
	Phone number/s:		

\*Students that are independent or over 18 years of age may provide their own consent and be responsible for all related costs.

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