



Mossman State High School

Ever Upwards – Thriving in the Heart of our Community

Activity consent form – Annual Band Tour 2026

Privacy Statement

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

- obtain consent for the named child/student to participate in the named off-site activity;
- help coordinate the off-site activity;
- respond to any injury or medical condition that may arise during or because of the off-site activity; and
- update school records where necessary.

The information will only be accessed by authorised departmental staff. The information will 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.

On Monday, 12th October, we will be touring the local primary schools as part of our Concert band activities. The aims of the activity are to provide a performance opportunity for our concert band members and recruit future students from the Douglas Cluster Primary Schools.

Activity details:

The concert band will perform at Wonga Beach SS, Miallo SS, Mossman SS and Port Douglas SS.

- Depart Mossman SHS at approximately 8:30am and return by 2:55pm.
- We will travel by FNQ Bus Lines stopping at the Raintrees for a lunch break. Students are advised to bring a water bottle and lunch but may also purchase their lunch at the lunch stop.
- Staff attending the tour are: - Jenny Guyatt, David Pyke, Katie Shepherdson, Hiromi Wall, Unity Beitzel and Bruce White.
- Dress: Concert band shirt, school uniform shorts and covered footwear.
- Students are expected to read and adhere to our school Responsible Behaviour Plan for Students (<https://mossmanshs.eq.edu.au/supportandresources/formsanddocuments/documents/responsible-behaviour-plan-for-students.pdf>)

Activity costs: Nil. **This activity is generously supported by the P and C Association**

If you wish for your child/student to participate in the activity, please complete this consent form and return all pages (including this page) to: The school office or Jenny Guyatt. For further information about the activity, please contact Jenny Guyatt on 0419 653 139 or jguva2@eq.edu.au.



Katherine McFarlane
Principal

Jenny Guyatt
Instrumental Music Teacher



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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 because 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 the type/s and level of private insurance they wish to arrange to cover their child. Please take this into consideration in deciding whether 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 of 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 students.
- I give consent for the named child/student, _____ (insert child's name) to participate in the identified activity.
- I will pay to the school the costs detailed in this consent form for the child/student's participation in the activity.
- I agree to and understand the refund policy as it applies to this excursion (see Activity 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.

Parent/Carer/Student*	Name:			
	Phone number:			
	Email address:			
	Signature:		Date:	

Additional medical information

The school collected medical information about your child at registration/enrolment. This information is stored electronically in One School. Please give full details of any new or updated medical information which may affect your child's full participation in the activity described in the form.

You may also wish to update/provide the following optional information:

Name of child/student'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 since October 2012 and these details have not changed, this information will already be recorded in One School.

☐ I would like this additional information to be recorded in One School records.

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

Uncontrolled copy. Refer to the Department of Education Policy and Procedure Register at <https://ppr.qed.qld.gov.au/pp/school-excursions-and-international-school-study-tours-procedure> to ensure you have the most current version of this document.

