



Mossman State High School

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Excursion consent form – Marine Science Field Work - Wavelength - Great Barrier Reef – Year 10 – 2024

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 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 Wednesday, 5th June, 2024, we will be visiting the Great Barrier Reef on Wavelength Cruises as part of our Year 10 Science program. The aims of the activity are for students to observe animals in marine habitats and collect information on abiotic factors that affect biodiversity as well as human and environmental impacts on the reef. Students will be required to use the information they collect to justify how abiotic factors and humans impact the reef environment to inform their understanding.

Excursion details: Students will participate in three snorkelling activities to examine the impacts on the reef due to climate conditions, temperatures, CO₂ levels and ocean currents. Students are shown how to identify corals at different stages of health and observe increased growth of algae in damaged coral zones. They will look at species diversity and a coral nursery and learn about the replanting program and the other actions being taken by the industry to reduce human impacts on the reef. All students will complete data booklets on the day noting how the data can be used to examine human and natural impacts on global systems like the ocean. To assist families in meeting the cost of the excursion, the Queensland Government, through the Great Barrier Reef Education Experience Program, provided a subsidy to the school of \$40.00 per student who attend the excursion in addition to Wavelength Cruises who have generously reduced their travel rate.

The details are as follows:-

DATE:	Wednesday 5 th June, 2024
TIMES:	Meet at Crystal brook Marina (Wavelength Cruisers at 8:00am and return at 4:00pm)
TRANSPORT:	Students to provide their own transport to and from the Marina Students are expected to read and adhere to our school Student Code of Conduct – https://mossmanshs.eq.edu.au/SupportAndResources/FormsAndDocuments/Documents/mossmanshs-student-code-of-conduct.pdf
MEALS:	Lunch and afternoon tea is provided on board (Meat or Vegetarian options). Please be aware if your child has specific dietary requirements they will need to bring an alternative lunch/snacks. There will not be an opportunity to buy lunch on this trip.
CLOTHING:	Full school uniform, a hat, bathers, sunscreen, jumper, sun shirt and a towel
ALSO BRING:	Required Medication, water bottle, a pencil and a pen.
STAFF ATTENDING:	Kyte Gawman, Andrew Ryan
DEADLINE DATE:	Wednesday 29 th May 2024
QPARENTS:	A digital consent form will be available in the QParents App

Excursion costs: \$85.50

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 with payment by **Wednesday 29th May 2024**. Please ensure that all payments are clearly identified as Year 10 Wavelength Reef Trip. For further information about the activity, please contact Kyte Gawman, Year 10 Marine Science co-ordinator on 4084 1333.


Ken Schaumberg
Principal


Lou Oliver
Head of Department Science & Agriculture



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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 of the information contained in this form in relation to the excursion (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, _____ <insert child's/student's name> 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 child/student contact information to be shared in relation to this excursion in compliance with relevant Queensland Chief Health Officer's Directions.

Parent/Carer/Student*	Name:		
	Phone number:		
	Email address:		
	Signature:		Date:
Emergency contact information for the duration of this excursion	Name:		
	Phone number/s:		

Additional medical information

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

Please include details about your **child's swimming ability** as this is a required activity for the day (for example they are competent swimming /snorkelling for 40 mins without assistance or they require assistance (floating aids) to swim.

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.: _____

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

