



Geraldton Residential College General Permission Form

Student Name: _____

Please tick the relevant boxes to indicate your permission for your child.

Skateboarding, Roller-skating and Roller Blading at Skate Parks and on Paths/Roads

I give my child permission to use a skateboard whilst boarding at the college. Appropriate safety equipment should be worn whilst riding a skateboard this includes a helmet.

Open and Close Water

I give my child permission to swim at beach and pool facilities whilst at the college. Appropriate bathers, the use of sunscreen and hats are essential. This is a fully supervised activity by qualified Boarding Supervisors, to ensure that Duty of Care is provided to students.

My child is a *strong / medium / poor* swimmer. (Please circle one)

Grade or level of swimming achievement is: _____

Bicycles

I give my child permission to use a bicycle provided by their parent and/or the college. Helmets are compulsory when riding a bicycle. Students are to follow the road rules and use appropriate riding etiquette when riding on foot paths. Students who damage college bikes or have them stolen because they did not secure them appropriately whilst out riding will have to pay for the cost of repair or replacement of the college bike.

Walking

I give my child permission to walk around the Geraldton CBD including to the shops, foreshore, parks, markets and schools. We encourage students to walk together in groups and inform Supervisors where they are going before leaving the college.

College Buses/Staff Vehicles

I give my child permission to be transported in a college bus or staff vehicle (when approved by the College Manager) where necessary.

Other Low Risk Activities

I give my child permission to participate in Low Risk Activities e.g, BBQ's at the beach, walks and bike rides along the forshore and late night shopping. These low risk activities are fully supervised by the Boarding Supervisors that are on duty when the activity occurs to ensure that Duty of Care is provided. When arriving at the destination students will be told if there are any areas that are not permitted.

General Medication

I give my child permission to be administered the following medication by staff as required:

Paracetamol Ibuprofen Disprin Antihistamine (non-drowsy)

Parent Name: _____

Parent Signature: _____

Date: _____