Dear Parents,

To ensure that your child has permission to take an active part in school activities and to assist parents, we have undertaken to combine a number of yearly permission notes onto the following two pages.

We hope this initiative will simplify things at a busy time of year.

One note must be complete per child – both sides must be completed.

Parents can clarify any of these permission notes by referring to the School Information Booklet (which is provided to all parents at enrolment) or contacting the school office on 46 211 201.

Sue Sessions
Principal

CHILD’S NAME: ____________________________________ CLASS: __________ DATE: ______________

1. Privacy Issue – Use of children’s names, photographs and work.
I give permission for my child’s name, photograph, artwork/work and their participation in school and community events to be used in the school newsletter and the wider community, including the media.
Parent/Caregiver: ______________________________________________ (Signature)

2. Personal Development, Health and Physical Education (Child Protection)
The PD/H/PE K-6 Syllabus covers a wide range of topics including; relationships, drug use, child protection, movement skill development and fitness. Some of the content in this learning area is sensitive and the school recognises this by teaching lessons within the context of a developmentally appropriate K-6 PD/H/PE program.
As part of the school’s PD/H/PE program this year, students will participate in lessons on Child Protection. In some of these lessons specific terms for private body parts will be used.
Parent/Caregiver: ______________________________________________ (Signature)

3. This year we are asking all parents to provide the school with your email address so that you can access the weekly newsletter from your computer in a more reliable way as well as save a huge amount of paper over the school year.
Email address: ___________________________________________________________________
Parent/Caregiver: ______________________________________________ (Signature)

4. PSSA Player’s Code of conduct (This section is for students in Years 3-6)
Should my child be selected to represent St Helens Park Public School in a PSSA team or at Zone/Area level in a sporting competition, I understand that the following expectations of conduct are strictly enforced and that the penalty for breaches of these guidelines will include a review of future participation in these activities.
1. I will compete by the rules and always abided by the decisions of the umpire/ Referee.
2. I will be willing to train and properly prepare for the event.
3. I will cooperate with my coach, team mates and opponents.
4. I will wear correct sports uniform and bring all necessary safety equipment
5. I will behave in a safe manner both on and off the field.
I agree to follow the player’s code of conduct when representing St Helens Park Public School on and off the field.
Student’s Signature: ____________________________ Date: ____________________
Parent/Caregiver: ______________________________ Date: ____________________
5. **Computer / Internet Code of Conduct.**
1. I agree to follow teacher instructions regarding the use of the computers and the internet.
2. I will not try to access or download and sites with socially unacceptable content.
3. I will not use any search words which are socially unacceptable.
4. I will ensure that any email I send out will not contain any inappropriate or offensive content.
5. I will not give out personal information such as my address, telephone number, parents work address and telephone number or location of my school without permission.
6. I will comply with the copyright laws relating to downloaded material and I will acknowledge these in my writing.
7. I will inform my supervising teacher immediate I come across any information that is unacceptable for school.
8. I will only use my thumb drive for education purposes as directed by the supervising teacher.

I agree to follow all the rules listed above when using the internet and understand that any deliberate breach of St Helens Park Public School’s protocol will result in the withdrawal of internet and email access.

**Student’s Signature:**

I have explained the rules listed above to my child and give permission for my child to access the internet and Email facility at school.

**Parent/Caregiver:**

6. **Religious Instruction / Scripture (Our school offers the following Scripture groups)**
   Please tick your preference;
   ( ) Catholic  ( ) Combined Protestant (Anglican, Uniting, Presbyterian, Baptist, Assemblies of God)
   ( ) Non Scripture

**Parent/Caregiver:**

7. **Emergency Treatment Permission**
   If I am UNABLE to be contacted, I hereby give permission for _____________________ (child’s name) to be given urgent medical treatment. I consent to my child being transported by ambulance to a hospital or doctor for such treatment.
   I understand that I will be contacted by the school as soon as possible on the emergency number provided by me.
   I understand that all children are covered by ambulance transport whilst attending our school.

**Name of local doctor of choice for emergencies:**

**Parent/Caregiver:**

8. **Permission for walking in the local area.**
   I give permission for my child to take part in walking in the local area. This approval covers students walking to the baseball complex on Kellerman drive for sports carnivals and PSSA training.

**Parent/Caregiver:**

**Privacy Notice:** The information provided on this permission note is being obtained for the purpose of parental acknowledgement of yearly school events. This information is stored securely. If information is not provided your child will not be permitted to take part in the designated activity. You may correct any personal information at any time by contacting St Helens Park Public School on 46 211 201.

**FOR OFFICE USE ONLY** (place a cross in any section where permission has NOT been given by parent/caregiver)