

## Attachment 5: Excursion Permission Form

<p>The _____ will be taking the _____  <small>(name of service) (specify the name of the group who is going)</small></p> <p>on an excursion to _____  <small>(proposed destination include any stops on the way there or back)</small></p> <p>on <a href="#">Click here to enter a date.</a>  <small>(date/year)</small></p> <p>The purpose of the excursion is for the children to:</p>
<p style="text-align: center;"><small>(list the activities that will take place)</small></p> <p>The excursion will leave from: _____  <small>(enter address of departure point)</small></p> <p>at <u>Select Time</u> and return to the service at <u>Select Time</u>  <small>(time) (time)</small></p> <p>The children and adults involved in the excursion will travel by:</p>
<p><small>(Method of transport and route)</small></p> <p>There will be <u>Select</u> staff members participating in the excursion, as well as Adult/Parent volunteers.</p> <p>It is anticipated <u>Select Here</u> Children will attend the excursion. The overall staff/child ratio will be <u>Choose ratio.</u> <small>(enter ratio of adults to children). _____ adults will also participate as volunteers.</small></p> <p>The cost of the excursion is <u>Select Cost</u></p> <p>A risk assessment for the proposed excursion has been prepared and is available</p>
<p>I <b>can/cannot</b> assist with supervision of this excursion <i>(adult/volunteers assisting are required to complete the Excursion Volunteer Form prior to the excursion).</i></p>
<p>I give permission for _____ (name of child) to attend</p>

the excursion to \_\_\_\_\_

I agree that my child shall be subject to the supervision of staff members in charge of the excursion.

I authorise the staff member in charge of the excursion, to consent to my son / daughter receiving such medical or surgical treatment or ambulance transport as may be necessary.

**Print name of Parent/Guardian** \_\_\_\_\_

**Signature of Parent/Guardian** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Phone number on the day:** \_\_\_\_\_

Any adult/parent participating in the excursion will be under the direct supervision of a staff member or a licensee representative while assisting in the supervision and care of children on the excursion. All volunteers assisting with the excursion will be required to complete the ECMS Excursion Volunteer Form prior to the excursion.

Siblings of children attending the service will be unable to attend.

If, for any reason, the excursion has to be cancelled, you will be notified on the day.

Please note that all Education and Care Services Regulations and ECMS Policies will continue to apply to staff, children and volunteers while on the excursion. (Sunsmart, No Smoking etc.).