**Authorisation for Excursion Form**

**Kelly Sports Geelong** has organised an excursion for your child to attend **Airodrome Trampoline Park** (Crown St, Geelong). All of the relevant details are provided below for your convenience. The service has conducted an Excursion Risk Assessment which is available for your review upon request. For your child to attend, you are required to read this information and complete the Authority for Excursion Form.

To complete this Form, you must be listed on the child’s enrolment record as either their parent or an Authorised Nominee.

**Child’s Full Name**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Time and Date of Proposed Excursion**

10am – 11am on Wednesday 27th of September 2017

**Route (to and from)**

Geelong Basketball Netball Centre (1 Crown St South Geelong) to Airodrome Trampoline Park Geelong (Cnr of Crown St and Barwon Terrace).

**Destination (s)**

Airodrome Trampoline Park Geelong (5222 5220)

**Transportation Details (to and from)**

3 minute walk from Geelong Basketball Centre to Airodrome Trampoline Park Geelong. Students will be walking in groups of 25 with two – three coaches with each group. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**The Period the Child will be Away from the Service Premises**

9:45am-11:15am \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Number of Adults Involved and the Anticipated Ratio of Adults-Children**

7-8 coaches (Ratio of 1:15) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Number of Children Involved**

75 children \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Proposed Activities**

Free jumping on trampoline

Dodgeball

Basketball rings

Foam pit

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**Items to Be Taken by the Child and Provided by the Parents**

Water Bottle \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Authority for my Child to Attend the Excursion**

Full Name

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship to Child

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Updated Emergency Contact Details (if different from the child’s Enrolment Form)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Interested in Volunteering to the Attend the Excursion?

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By signing the Authorisation for Excursion Form, I agree to and understand the following –

 My child has my permission to attend the excursion listed. If the excursion is a regular

outing, my child has permission to attend for 12 months after the date listed below.

 I am listed on the child’s Enrolment Form as a Parent or Authorised Nominee.

 I have read all of the details provided by the service and understand that I can access the

Excursion Risk Assessment at the service.

 The contact details, including all emergency contact details, listed on my child’s Enrolment

Form are up-to- date. If not, I have provided the updated contact details above.

Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_