

**LA SALLE COLLEGE
MEDICAL AND MEDIA CONSENT FORM 2021**



Please ensure that **all** details are completed. These forms provide important information to be used on retreats/camps and on a daily basis.

Student's Name: _____ Year: _____ PCG: _____ D.O.B. _____

Parent's /Guardian's Full Name: _____

Address: _____ Postcode: _____

Telephone: (Hm) _____ (Wk) _____ (Mob) _____

Medicare Number: _____ Ambulance Fund: YES/NO

PERSON TO BE CONTACTED WHEN PARENTS ARE UNAVAILABLE:

1. Emergency Contact : _____ Telephone: _____ Mob: _____

2. Emergency Contact: _____ Telephone: _____ Mob: _____

Family Doctor: _____ Practice: _____ Telephone: _____

PLEASE ACKNOWLEDGE IF YOUR CHILD SUFFERS FROM ANY OF THE FOLLOWING CONDITIONS: If so, the College requires INFORMATION regarding triggers, signs and symptoms of reaction and first aid medication. If your child has a medically approved Action Plan, please supply all relevant paperwork to be kept on file. Medications required (eg. EpiPen, Antihistamine) are to be held by student on their person at all times.

- | | | |
|---|---|--|
| <input type="checkbox"/> ADD/ADHD | <input type="checkbox"/> Allergies to _____ | <input type="checkbox"/> Anaphylaxis to _____
<i>(An ASCIA Action Plan for Anaphylaxis is required. Please contact Student Reception on 9449 0601.)</i> |
| <input type="checkbox"/> Asthma | <input type="checkbox"/> Diabetes | <input type="checkbox"/> Dizzy Spells & Black Outs |
| <input type="checkbox"/> Epilepsy | <input type="checkbox"/> Migraines | <input type="checkbox"/> Heart Condition |
| <input type="checkbox"/> Other (Please List): _____ | | |

Any student required to take prescribed medication on a short or long term basis must provide the medication to staff in Student Reception where it will be securely stored. The student's name, name of medication, the dosage and frequency must be clearly labelled. (All medications must be provided in their original packaging with a clearly visible label and expiry date. Blister packs of tablets that have been cut, will not be accepted.) It is the student's responsibility to report to Student Reception where they will be required to self-administer the medication under the supervision of a staff member from Student Reception. Written authority for medication is required to be completed by parents.

Parents are responsible for keeping the school up to date with any changes in medical status/information that occurs during the year.

Students are permitted to carry one dose only of paracetamol or ibuprofen for personal use.

IF YOUR CHILD REQUIRES ONGOING MEDICATION (INCLUDING VENTOLIN), PLEASE COMPLETE THE FOLLOWING:

Name of Medication: _____ Treatment for: _____

Dosage: _____ Frequency: _____ Expiry Date: _____

MEDICAL AND MEDIA CONSENT

(This box must be completed by the student's parent/guardian.)

I authorise school staff to administer FIRST AID treatment to my child as may be deemed necessary. I also authorise a staff member to contact an ambulance and seek appropriate medical attention should I not be able to be contacted.

Yes No

I consent to my child's image being used in school-related publications such as newsletters, marketing, advertising and social media.

Yes No

Parent/Guardian Name: _____

Parent/Guardian Signature: _____ Date: _____

Please refer to important information overleaf.

Privacy Policy Information

La Salle College collects personal information, including sensitive information about students and parents or guardians, to enable the College to provide the appropriate care for our student's educational, social and medical wellbeing. Some of this information is to satisfy the College's legal obligations, particularly to enable the College to discharge its duty of care.

Health information about students is sensitive information within the terms of the Australian Privacy Principles under the Privacy Act. We may ask you to provide medical reports about students from time to time, and will regularly ask you to update any changes to a student's medical information.

La Salle College respects the confidentiality of student and parents/guardians' personal information and the privacy of individuals. Sensitive information will be used and disclosed only for the purposes for which it was provided, or for a directly related secondary purpose unless the individual directs otherwise or the use or disclosure of sensitive information is allowed by law.