



## EDUCATION OUTSIDE THE CLASSROOM DISCLOSURE OF RISK FORM

I, \_\_\_\_\_, give permission for my daughter,  
\_\_\_\_\_, to participate in all educational  
activities

outside the classrooms e.g. field trips, sports trips, cultural exchanges and  
team/confidence building exercises throughout the year.

- I acknowledge that some risks are associated with participation in these activities.
- I agree that she should take part in such activities and such necessary duties as may be required by staff.
- I agree that the school is not responsible for any bodily harm and I authorise the obtaining on my behalf of medical assistance, if in the opinion of staff, such treatment is necessary, and agree to meet any costs incurred.
- To the best of my knowledge she has no medical or physical disabilities likely to prove detrimental to her or others during the programme, other than those disclosed to the school by me.
- I understand that the school will not accept responsibility for loss or damage of personal property or equipment.
- I accept that my child will use public transport, school mini bus or private transport that is designated by school staff.
- I will endorse the rules set down by the school and make sure my child is aware of her responsibilities.

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

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

**I as a student, undertake to participate in all activities required of me, I will adhere to the rules and guidelines set down by the school. I will be responsible for my belongings and not wilfully harm another person, person's property or our environment.**

**Student's  
Name** \_\_\_\_\_

**Signature of  
Student** \_\_\_\_\_

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