

Student Medical Permission Form

Parent/guardian information

I give permission for(name) to attend RLOEC
 from until(dates).

- I agree that she/he should take part in such activities and such duties as may be required by staff.
- I authorise any medical assistance that maybe needed, if in the opinion of the staff such treatment is necessary, and I agree to meet any costs associated with this.
- I accept that the RLOEC will not accept responsibility for loss or damage of personal property (check own household policy).
- I give permission to use images that may be taken on camp for promoting RLOEC to other schools and the wider community.
- To the best of my knowledge she/he has no *medical, emotional or physical* disability likely to prove detrimental to her/him or others on the camp.
- Should she/he become sick on camp, I will come to the Lodge to collect them and that if I refuse to collect them, they will be transported back home at my expense.
- Should she/he be involved in a serious disciplinary problem, I accept that she/he may be sent home and that I will come to the Lodge to collect them and that if I refuse to collect them, they will be transported back home at my expense.

CONFIDENTIAL MEDICAL REPORT

Name:.....

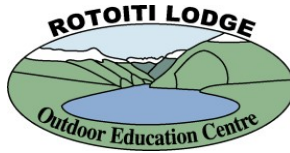
Form class

Medical Issue	Cause	Symptoms	Treatment	Specific Medication
Example: asthma	cold weather & physical exertion	wheezy, difficulty breathing	rest, use inhalers	Becotide preventative, Ventodisk 200 mcg

Anything else that may affect them during the camp (detail)

.....

.....



Please tick if your child suffers from any of the following:

Bed wetting Seizures of any kind Heart condition
Dizzy spells Sleep walking Asthma
Migraine Travel sickness Other (specify)

Allergies to: Penicillin Food Drugs Wasps/bees None

Last Tetanus injection (date)

Does your child have special dietary requirements (detail)
.....

Swimming ability: (please circle) Poor (not confident in water - unable to swim 25m)
Ok (confident in the water - able to swim 50m)
Good (confident in deep water - able to swim 100m)
Excellent (confident in deep water - able to swim 200m)

Risk Disclosure:

Parents/guardians should be aware that activities undertaken at RLOEC are of an adventurous nature and the possibility of injury or harm should not be ignored.

These activities may include Canoeing on Lake Rotoiti, High and Low Ropes activities, Abseiling, Mountain Biking, Overnight and Day Tramping Trips, Team Building Activities (Group Initiatives).

These activities are not without risk and although all appropriate safety measures are taken, including the use of correct safety equipment and staff who have received the appropriate training, there is still a chance that they could result in harm to participants.

RLOEC complies with all New Zealand legislation, is externally audited, and holds an Adventure Activity Safety Audit Certification from OutdoorsMark NZ.

Contact Details:

Name: Day: Night.....

Name: Day: Night.....

Doctor: Phone number:

Address.....

Signature of student:.....

Signature of parent/guardian:..... Date.....