## **Queensland School Sport**



## 5.0 Acceptance of Invitation / Parental Consent Form

QUEENSLAND SCHOOL SPORT TEAM:				Swimming						
I accept the inv	ritation for my child,		to be a Queensland							
team member and hereby give consent for my child to take part in any activity arranged by, or participated in, by Queensland School Sport. I also give my permission for him / her to use such forms of transport for travelling as may be necessary.  I agree:										
1. That my child, in accepting a position in the Queensland School Sport team, will commit to full participation in the team's program.										
activities a	. That during the period of the competition in which my child participates, and during such travelling and other activities as may be necessary, my child shall be under the sole direction of the person or persons appointed in charge of the team in which my child is included.									
in addition for late not	. To meet the costs associated with this activity which include competition, team management and player levy in addition to Administration fees and Education excursion costs. I accept that I may incur a cancellation fee for late notification in cancelling travel bookings as outlined in the Queensland School Sport flight terms and conditions <a href="https://queenslandschoolsport.eq.edu.au.">https://queenslandschoolsport.eq.edu.au.</a>									
	For meet additional costs for any accident, illness, injury, or other unforeseen circumstances which may occur during the period of the activity in which my child participates. This also includes the period of travel.									
	5. To the sharing of my child's personal information under the conditions outlined in Form 4.0 'Invitation to be a Queensland Team Member'.									
6. I understand that the school principal must approve my child's participation in the QSS team. If the principal does not give his or her approval then my child will not be eligible to participate in the QSS team.										
I have read the team member's Code of Conduct, understand its contents and conditions, and accept the parental responsibilities contained therein. I have also read the Codes of Conduct for parents and spectators and agree to respect and abide by those codes.										
Signed By:				(Parent/ Careg	iver name)					
Signature:				Date:						
YES/ NO	I give my consent for my son's / daughter's swimming results to be forwarded onto Swimming Queensland and Swimming Australia									

## **Student's Agreement to the Code of Conduct**

Conduct and agree to abide by its conditions.	have	read	and	understand	the	Team	Members'	Code	of
Signed:		Da	ite:						

Queensland School Sport, as an operational unit of the Department of Education and Training is collecting the information on this form in accordance with the Information Privacy Act 2009 in order to share this medical history with medical professionals in the event of an accident or illness. The information will only be accessed by persons authorised by Queensland School Sport, including appointed team officials. The information provided will not be used or disclosed to any other person or agency unless either you have given permission, it is required by law or in the interests of student health and welfare.