



3 August 2017

Dear Parent/Caregiver,

All students in years 4, 5 and 6 will have the opportunity to experience the "Cyber Wiser" performance on Monday, 21 August. This performance will offer simple and sound advice that will benefit all students, as many current issues surrounding the use of social media and appropriate behaviour, will be covered.



Reference Code for Internet Banking: CYB		Child's surname, initial and activity code, eg SmithX – CYB	
Risk level	Low	Activity leader	Nickie Galloway Deputy Principal
Cost	\$4.50		
When	Monday 21 August – 9.00 am		
Where	CPAC Hall Robina SS		
What to Wear	School Uniform		
Last payment day	Thursday 17 August	Internet Banking day	Thursday 17 August

If you wish your child to attend the above performance, please complete the permission slip below and return to School. Payment can be made either to the Finance Office or via Internet Banking.

No late payments can be accepted. *Refunds are not always possible due to performance booking policies.*

Carmel Baker, Principal

Nickie Galloway, Deputy Principal

Privacy Notice The Department of Education and Training (DET) is collecting the personal information requested in this form in order to:

- obtain lawful consent for your child to participate in the activity;
- help coordinate the activity;
- respond to any injury or medical condition that may arise during, or as a result of the activity; and
- update school records where necessary.

The information will only be accessed by authorised school staff and will be dealt with in accordance with the confidentiality requirements of s.426 of the Education (General Provisions) Act 2006 (Qld) and the Information Privacy Act 2009 (Qld).

The information will not be disclosed to any other person or agency unless it is for a purpose stated above, the disclosure is authorised or required by law, or you have given DET permission for the information to be disclosed.

Activity Risks & Insurance

Please note that the Department of Education and Training does not have personal accident insurance cover for students. If your child is injured as a result of an accident or incident while participating in the activity, all costs associated with the injury, including medical costs are the responsibility of the parent/carer. Some incidental medical costs may be covered by Medicare. If you have private health insurance, some costs may be also be covered by your provider. Any other costs must be covered by parents/carers. It is up to all parents/carers to decide what types and what level of private insurance they wish to arrange to cover their child. Please take this into consideration in deciding whether or not to allow your child to participate in this activity.

PAYMENT OPTIONS:

Finance Office:	Monday to Thursday 8.00-10.00am Cash or Credit. EFTPOS Available. Mastercard or Visa
Centrepay Deductions:	Payments can now be made in advance via Centrelink if you are receiving Centrelink payments such as Pension, Newstart Allowance, Family Tax Benefit. Please make all enquires, <i>before payment is due</i> , at the Finance Office .
School's Bank A/c Name:	Robina State School General Account BSB Number 064 445 Account Number: 00902494

PAYMENT FORM – Cyber Wiser

Please return to the Finance Office

STUDENT NAME: CLASS:

I enclose my cash payment I have paid via the internet, in the amount of \$.....

Reference Code for internet banking - CYB

CONSENT FORM - Cyber Wiser

Please return to the Finance Office

STUDENT NAME: CLASS:

Is your child taking any medication? Yes / No If Yes, details:
Are there any medical conditions we should be aware of during this excursion?

Consent

By signing this form (*below*) I agree that:

- I have read all of the information contained in this form in relation to the activity (including any attached material) and I am aware that the Department of Education and Training does not have personal accident insurance cover for students.
I give consent for my child, to participate in this activity.
- **I will pay to the school the costs detailed above for my child's participation in this activity.**
- In the event of an accident or illness, school staff may obtain or administer any medical assistance or treatment my child may reasonably require, including contacting an ambulance or my child's doctor.
- I accept liability for all reasonable costs incurred by the Department of Education and Training in obtaining such medical assistance or treatment (including any transportation costs) and undertake to reimburse the Department of Education and Training the full amount of those costs.
- I have provided the school all relevant details of my child's medical or physical needs on enrolment and where relevant have updated this information.

Parent/Carer Name: (Please Print)

Parent/Carer Signature: Date:/...../.....

Additional medical information

The school collected medical information about your child at enrolment. This information is stored electronically in OneSchool. Please give full details of any new or updated medical information which may affect your child's full participation in the activity described in the form.

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You may also wish to provide the following information*:

Name of child's medical practitioner: Telephone No.:

Medicare No.:

Private Health Insurance Company (if applicable) Membership No.:

*If an enrolment form for your child has been completed or updated since October 2012 this information will already be recorded in OneSchool.

I would like this additional information about my child's medical information to be recorded in OneSchool records.