



Axis Youth Centre  
 Queanbeyan Park  
 Off Campbell St  
 Ph.: 02 6285 6340 or 6285 6341



PO Box 90, Crawford Street  
 Queanbeyan NSW 2620

## Consent for Axis Youth Centre School Holiday Program Spring 2019

I \_\_\_\_\_ (parent/guardian) hereby give permission for \_\_\_\_\_ (child) to participate in the Axis Youth Centre Spring School Holiday Program 2019 under the supervision of Axis Youth Centre staff. I understand that participation is at own risk. Transport will be provided to and from Axis Youth Centre. Activities and excursions are also free.

***PLEASE NOTE: If you wish to come along on any of the excursions you will need to have attended at least one of the drop in School holiday activities.***

**I give permission for my child to participate in the following activities (please circle):**

- |                    |     |    |
|--------------------|-----|----|
| - Limelight Cinema | YES | NO |
| - Batemans Bay     | YES | NO |

*(See excursion details on Page 2)*

*Please note: all other activities are drop-in based and do not require parent permission for participation.*

### Parent/Guardian –Emergency Contact Details:

***First Emergency Contact:***

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Mobile Phone: \_\_\_\_\_ Land Line: \_\_\_\_\_

Address: \_\_\_\_\_

***Second Emergency Contact:***

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Mobile Phone: \_\_\_\_\_ Land Line: \_\_\_\_\_

Address: \_\_\_\_\_

I give permission for my child to receive medical treatment in case of emergency Y N

\_\_\_\_\_  
Signature of Parent/Guardian

I hold ambulance cover? Y N

Details of ambulance cover: \_\_\_\_\_

My child has the following medical conditions (list conditions such as diabetes, epilepsy, asthma or allergies):

.....  
.....  
.....  
.....

**Note: If your child has an Emergency Action Plan, a copy MUST be provided.**

My child is currently taking the following medications (list all medications):

.....  
.....  
.....

\_\_\_\_\_  
Signature of Parent/Guardian

In giving this information, I indemnify Queanbeyan Palerang regional council, Coordinator and staff of Axis Youth Centre from all liability, claims, or actions directly or indirectly arising from these activities.

I understand that should my child leave the premises of the activity, or act against the direction of staff, Queanbeyan Palerang regional council will not be liable for any accidents or injuries incurred.

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Participant

\_\_\_\_\_  
Date

**Cinema and Batemans Bay Excursion**

Please note that this excursion will be outside of the Queanbeyan/Canberra area. The excursion to Batemans Bay will depart Queanbeyan at 8.30am from the Youth Centre, and will arrive from Batemans Bay into Queanbeyan around 18.30 pm. Youth Centre staff will provide lunch for your child. Your child may also bring their own money to purchase their own refreshments.

We advise that your child brings with them a change of clothes, Towel, water bottle, a hat and sunscreen.

Axis staff will supervise your child to the best of their abilities. However, please note that if your child misbehaves, does not follow instructions, and is a safety issue for staff members, then you will be contacted to come and collect them.

Please also note that Youth Centre staff reserve the right to not allow your child to attend this excursion.

\_\_\_\_\_  
If you have any questions or enquiries please contact  
Axis Youth Centre staff on (02) 6285 6340 or (02) 6285 6341 or 0402 974 931.  
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