

LOGO

# SAMPLE PRIMARY SCHOOL

(Demo form — fictional)

## Excursion consent form

Please complete and return to the office.

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### Student details

Student's full name

Date of birth

Year / class

School

### Address

Street address

Suburb

Postcode

### Emergency contact (in case we can't reach a parent)

Name

Phone

### Medical

Allergies (food, medication, environmental)

Medical conditions / regular medications

Parent/guardian signature: \_\_\_\_\_ Date: \_\_\_\_\_