

# School Sport South Coast PERMISSION / DETAILS BOOKLET



Updated April 2021

▶ NB. (Make sure you have the latest version of **Adobe Reader** installed on your operating system).  
This document has been designed as an electronic version for your convenience.

## BOOKLET INCLUDES THE FOLLOWING FORMS

- Authority & Consent
- Availability / Non Availability for Selection
- Parental Consent
- Student Details
- Medical Details
- Mouthguard Consent
- Project Consent
- Code of Conduct – Team Members
- Code of Conduct – Parents & Spectators

DETAILS	
Surname :	First Name :
Date of Birth :	Gender :
School :	District :
Phone (Home) :	Mobile (Parents):
	Mobile (Students) :
Parent's Email address :	
Sport :	Age Level :

## ▶ INSTRUCTIONS

- It is compulsory for all students / parents to complete **ALL** forms in this booklet.
- All fields with a **red** outline **MUST** be completed. Other boxes only need to be completed (where applicable).
- Open document, save blank document to computer, complete and save final copy of document.
- Sign and obtain signatures for appropriate sections. ie. Principal or (nominee), parents and students (Pages 2, 3, 4, 5, 6, 7 & 12)
- Deliver document to appropriate personnel at Regional Trials
- Code of Conduct pages do not need to be returned (These forms are for parents/ guardians and students information)

## ▶ FORMS

- This fully completed document must be submitted prior to trialling.
- SSSC Policy states that **NO Booklet** equals **NO Trial**
- To avoid duplication this document will be passed on by the appropriate officials from one level to the next level as students progress through the representative sport program.
- NB. Please complete the **Change of Details Form**, if any details change after this booklet has been submitted
- Information provided in this booklet is valid to 31 December of the current year.

DATE COMPLETED :

# AUTHORITY & CONSENT FORM

**(To share personal details and medical history)**

Surname :	First Name :
Date of Birth :	Gender :
Sport :	Age Level :

**1. CONSENT GIVEN**

On behalf of the individual identified on this consent form, the individual, the person or persons signing this Consent Form (the Signatory)\* grant consent to the Department of Education. (the Department) and relevant medical professional in the event of accident or illness to use, record and disclose the individual's:

- Name and other identifying information (personal information); and
- Medical history.

▶ Note: If the individual is under 18yrs of age, the Signatory must be a parent or guardian of the Individual. The individual must also sign if he or she is under 18 and able to give and understand the consent. If the individual is 18 or older, the Signatory and the individual will be the same person.

**2. PURPOSE**

The Department of Education is collecting your child's personal details (Form B6) and medical history (Form B7) in accordance with the *Information Privacy Act 2009* and *section 426 Education (General Provisions) Act 2006*, in order to share your son/daughter's medical history with medical professionals in the event of accident or illness. The information will only be accessed by authorised employees within the Department of Education. This information will not be given to any other person or agency unless either you have given permission or it is required by law.

**3. DURATION**

This authority and consent will continue until 31 December of the current year, except triathlon & aquathlon, where form will remain valid for 12 months from the signature date. This Consent Form revokes and replaces all previous consent forms in relation to the individual.

**4. LIMITATIONS**

The individual or Signatory wishes to limit the consent in the following way

**AUTHORITY AND CONSENT**

- I hereby authorise the obtaining on my behalf of such medical assistance as .....(name of Individual) may require in the event of accident or illness. I authorise the administering of anaesthetic if this is deemed necessary by the medical officer attending.
- I consent for authorised Department of Education employees to share:
  - My personal details, and
  - The individual's personal details and medical history with relevant medical professionals in the event of accident or illness or as required by law.

**STUDENT**

<b>Student Signature:</b> <small>(Student's signature only required if 18 or over)</small>		Date:	
<b>Parent / Guardian Signature:</b>		Date:	

SIGN HERE

SIGN HERE

School Sport South Coast, as an operational unit of the Department of Education., is collecting the information on this form in accordance with the Information Privacy Act 2009 for the purpose of contacting you in regard to your child's participation in a Queensland School Sport Event. 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.

## AVAILABILITY / NON-AVAILABILITY FOR SELECTION FORM

Surname :	First Name :
Date of Birth :	Gender :
Sport :	Age Level :

This form **MUST** be completed and given to the District manager / Official prior to the District / Regional Trial.

Availability / Non Availability for selection in a regional team is conditional upon acceptance of the following conditions.

- Students must be available to participate for the full duration of the State Championships and understand that they will not be available for any other activities including school, club and community activities / sporting games during the championships.
- All team members are advised that leave will not be granted to participate in any other activity from the time of State Championship team assembly. Any students requesting to leave the championship, in emergent circumstances must seek the approval of the team management.
- If selected in a Regional Team, all Team members, except for those in T&F & Swimming, must be available to attend State Championship Opening and Closing ceremonies, team photos session and any other stated compulsory events.
- Students shall not make themselves available for selection in more than one summer and one winter sport (Excluding swimming, cross country and athletics), where the dates of regional or state championships may overlap for training or competition.
- Members of the regional team will be required to train outside of school hours prior to the State Championships. If not available for any session, they must notify the team officials prior to training.
- The student must genuinely want to be a member of the regional team and will only withdraw for exceptional circumstances. Withdrawal without notice or exceptional circumstances may result in exclusion from selection in any district / regional teams.
- On some occasions costs may be a factor of availability for selection. Payment in full will need to be made at least 2 weeks prior to the State Championships. Please take this into account before making yourself available for selection. A copy of these approximate costs can be obtained through the School Sport Coordinator or found on the South Coast School Sport website.
- Students and Parents who accept an invitation to be a member of the regional team must agree to abide by contents and conditions of the "Code of Conduct – Team Members and Code of Conduct – Parents & Spectators" and accept the parental responsibilities contained therein.

### PARENT / GUARDIAN

*I have read and agree to the conditions stated above. I give approval for my child to participate in the district / regional trials and Request / Do Not Request (circle one) that my child be considered for selection in the above-mentioned district / regional team.*

Parent Signature:

Date:

SIGN HERE

### STUDENTS

*I wish to be considered for selection in the above named sport in the district / regional team and agree to be bound by the above conditions.*

Student Signature:

(Student's signature only required if 18 or over)

Date:

SIGN HERE

### PRINCIPAL

*I Approve / Do Not Approve (Circle one) of the selection of the above named student in the district / regional team and verify that the date of birth is correct.*

Principal Signature:  
(or Nominee)

Date:

SIGN HERE

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## PARENT CONSENT FORM

Surname :	First Name :
Date of Birth :	Gender :
Sport :	Age Level :

- I accept the invitation for my child to be a South Coast Team Member and I hereby give my consent for my child to participate in any activity arranged by, or participated in by the School Sport South Coast or any affiliated body.
- I understand that participation in this team is also dependent on the receipt of a signed Principal's Approval Form verifying that my child is enrolled as a student at that school and that the school is confident that my child can abide by the Team Members Code of Conduct, and that the students record of attendance and conduct are of a high standard such that the school recommends the student as one who merits selection.
- I hereby give my permission for him/her to use such known forms of transport, including air or coach transport, for such travelling as may be deemed necessary.
- I agree that, during the periods of the aforesaid competition in which my child is participating, and during such travelling and other activities as may be deemed necessary, my child shall be under the sole direction of the person/s duly appointed in charge of the squad/s and/or team/s in which my child is included.
- I agree to meet the costs associated with participation in this activity, and accept that I may forfeit levies paid and / or incur a cancellation fee for late notification in cancelling travel bookings. Parents may incur any penalties imposed by the airlines, if alterations are made to the flight arrangements provided for your child by School Sport South Coast. NB. Penalties of up to 100% may be imposed by airlines 30 days out from travel date.
- I further agree to meet the costs for any illness, accident or unforeseen circumstances which may occur during the periods of the activities in which my child participates and during such travelling and other activities as may be deemed necessary.
- I agree that if my child has a medical condition that may impact on their safety during participation in sporting activities that they must be cleared by a medical practitioner, to participate in the activity.
- I further agree that my child must wear a mouthguard when participating in AFL, Rugby Union, Rugby League, Hockey and Water Polo. The Department of Education strongly recommends that students wear custom-fitted mouthguards. I understand that mouth protection is mandatory in these sports. I have read the information provided to me about mouth protection and accept responsibility for the type of mouth protection my child will wear whilst playing these sports.
- I acknowledge that the Department of Education / School Sport South Coast do not have personal accident insurance cover for students during competition and associated activities. Sport, particularly contact sports, carries inherent risks of injury. It is a personal decision of the parents as to the type and level of private insurance they arrange to cover students for any accidental injury that may occur.
- I also agree that my child is responsible for sun protection by providing their own hat and SPF 15+ broad spectrum sunscreen.
- I have read the attached **SSSC Code of Conduct – Team Members and Code of Conduct – Parents & Spectators**. I understand and agree to abide and respect its contents and conditions and accept the parental responsibilities contained therein.
- I understand if I fail to complete all documentation or fail to abide by stated conditions, that a range of consequences may be applied and my child may be excluded from future involvement in School Sport South Coast.

### ▶ AGREEMENT

I, \_\_\_\_\_ have read and understand the above together with the Code of Conduct – Team members and Code of Conduct – Parents & Spectators and agree to abide by its conditions.

Parent / Guardian Signature:

Date:

SIGN HERE

Student Signature:

Date:

SIGN HERE

(Student's signature only required if 18 or over)

*School Sport South Coast, as an operational unit of the Department of Education, is collecting the information on this form in accordance with the Information Privacy Act 2009 for the purpose of contacting you in regard to your child's participation in a Queensland School Sport Event. 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.*

## STUDENT DETAILS FORM

*It is School Sport South Coast policy that officials' first preference of contact is directly with parents. However, in certain situations South Coast Officials may need to contact team members directly.*

*I \_\_\_\_\_ (Parent / Caregiver) of \_\_\_\_\_ **give / do not give** permission for my child to be contacted directly via phone/text message by the appointed School Sport South Coast Officials in matters directly concerning the activities related to being a team member of School Sport South Coast \_\_\_\_\_ team. Pre-carnival contact may include matters relating to training prior to the championships, and for communication and risk management whilst the team is away.*

Contact Phone (Parent) :		Contact Phone: (Student):	
Parent Signature :		Date :	

SIGN HERE

### ▶ PLAYER DETAILS

Surname :		First Name :	
Date of Birth :		Gender :	
Home Address :			
	Postcode :		
Phone (Home) :		Mobile (Students) :	
Parent's Email address :			
School :			

### ▶ PARENT/ GUARDIAN / CARER (1)

Surname :		First Name :	
Home Address : (If different to player's)			
	Postcode :		
Phone (Home) :		Mobile (Parents) :	
Parent's Email address :			
Business Address :			
	Postcode :		
Phone (Business):			

### ▶ PARENT/ GUARDIAN / CARER (2)

Surname :		First Name :	
Home Address : (If different to player's)			
	Postcode :		
Phone (Home) :		Mobile (Parent 2) :	
Parent 2 Email address :			
Business Address :			
	Postcode :		
Phone (Business):			

### ▶ CONTACT PERSON ( When parent / guardian / carer cannot be contacted)

Surname :		First Name :	
Home Address : (If different to player's)			
	Postcode :		
Phone (Home) :		Mobile Phone:	

### ▶ ANY RELEVANT FAMILY HISTORY


School Sport South Coast, as an operational unit of the Department of Education, is collecting the information on this form in accordance with the Information Privacy Act 2009 for the purpose of contacting you in regard to your child's participation in a Queensland School Sport Event. 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.

## MEDICAL DETAILS FORM

Surname :	First Name :
Date of Birth :	Gender :
Sport :	Age Level :

### IMMUNISATION DETAILS (Please complete. List others as appropriate)

Injection	Yes	No	Date of Injection
Tetanus			
Hepatitis B			

Do you suffer from asthma ?	Yes	No	
If "Yes", attach your Action Plan			
Are you allergic to any medication/s or suffer anaphylactic reactions?	Yes	No	List of Medications
If "Yes", list medications:			
If "Yes", attach your Action Plan			
Are you currently being treated by a medical practitioner ?	Yes	No	List of Medications
If "Yes", list details and all current medication/s.			
Are you suffering from an injury or medical condition(s) which is likely to be aggravated by competition?	Yes	No	
If "Yes", list details:			
NB. If "Yes", please attach a <b>medical clearance certificate</b> in order to participate in this activity:			

Medicare Card No. :	
Cardholder Name (if not in name of student)	
Private Health Insurance Company Name (if covered)	
Private Health Insurance Membership Number	
Personal Accident & Injury Insurance Do you have cover against accident/injury for competitions and associated activities (training, travel, etc.)	Yes      No
Personal Accident & Injury Insurance Company Name	

**Please list any other relevant medical history**

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**NB.** Parents are advised that the Department of Education does not have Student Accident Insurance cover for students. Department of Education / School Sport South Coast will not accept financial liability for such expenses if they should arise.

- Therefore, if your child is injured as a result of an accident or incident, all costs associated with the injury, including medical costs, are the responsibility of the child, parent or caregiver. Some incidental medical costs may be covered by Medicare. If parents have private health insurance, some costs may also be covered through the private health insurance. Any other costs would be borne by the parents.
- Where supervision of the administering of medication is required while the student is away from home, parents will need to document details in separate correspondence to the Team Management.

### MEDICAL AUTHORISATION

- I hereby authorise the obtaining on my behalf of such medical assistance as my child may require in the event of accident or illness and guarantee to meet any costs incurred.
- I authorise the administering of anaesthetic if this is deemed necessary by the medical officer attending.
- I acknowledge that the Department of Education does not have Student Accident Insurance cover for students

### PARENT / GUARDIAN

Signature	Date:
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SIGN HERE

## MOUTHGUARD CONSENT FORM

The Department of Education Curriculum Activity Risk Assessment (CARA) guidelines mandate that **mouthguards are compulsory** for students wishing to participate in a school sport representative event for the sports listed below.

- Australian Football (AFL)
- Rugby League
- Rugby Union
- Hockey
- Water Polo

The Department of Education strongly recommends that students wear custom-fitted mouthguards.

Parents / Carers are requested to refer to the Australian Dental Association website below in order to make an informed choice about the different types of available mouthguards.

<https://www.ada.org.au/Your-Dental-Health/Teens-12-17/Mouthguards>

If a student is unable to wear a mouthguard for medical reasons, then:

- a signed medical clearance certificate is required prior to participating in the representative event.

Please complete the **Parent / Carer Consent And Medical Declaration Section** below

- Return this form to the relevant team official, along with all other required paperwork, **prior** to the representative event.
- **Failure to comply** with this permission process will mean that the **student will be unable to participate** at the specific representative school sport event.

STUDENT DETAILS			
Surname :	First Name :		
Date of Birth :	Gender :		
Sport :	Age Level :		

  

PARENT / CARER CONSENT AND MEDICAL DECLARATION	
I, _____ (name of parent) understand that mouth protection is mandatory in this sport. I have read the information provided to me about mouth protection and accept responsibility for the type of mouth protection I/my child will wear whilst playing this sport.	
I confirm that the above mentioned student:	
<i>Please tick <u>one</u> of the boxes below</i>	
<input type="checkbox"/> Has <b>NO</b> identified medical condition/s that may impact on their safety by wearing a mouthguard during participation in this sport.	<div style="text-align: right; font-size: small; background-color: #ffc107; padding: 2px;">SELECT AN OPTION</div>
OR	
<input type="checkbox"/> Has an identified medical condition/s that may impact on their safety during participation in this sport and therefore <b>cannot wear a mouthguard</b> . <b>GO TO MEDICAL CLEARANCE SECTION below</b> . NB. Will need to be completed by a medical practitioner.	<div style="text-align: right; font-size: small; background-color: #dc3545; padding: 2px;">SIGN HERE</div>

  

PARENT / GUARDIAN			
Signature	Date:		

### MEDICAL CLEARANCE – Re: Mouthguard

**NB. ONLY NEEDS TO BE COMPLETED if ticked "Cannot wear a mouthguard" in the section above**

The following to be completed by a **Registered Medical Practitioner**

Please stamp OR print your name, degrees / special qualifications, address of practice and provider number.			
<b>I certify that I saw and examined</b>	First Name:	Surname:	on
<ul style="list-style-type: none"> <li>• I am of the opinion that this person has an identified medical condition/s that may impact on their safety during participation in this sport and therefore <b>cannot wear a mouthguard</b>.</li> </ul>			
Dates of QSS / Regional Competition :		/ / to / /	
Signature	Date:		



Enter Date

Dear

**Introduction to the Consent Form (attached) for Queensland School Sport representative school sport - .**

This letter is to inform you about how the Department of Education (the department) through Queensland School Sport will use, record and disclose your or your child's personal information and material. It outlines:

- what information we record; and
- where and how we will use the materials.

Examples of personal information, which may be used and disclosed (subject to consent), include an individual's name (first name and surname or part of their name), school, school year level, date of birth, age, sporting organisation personal identification number, image/photograph or voice/video recording.

Materials that are created by your child, whether as an individual or part of a team, may be replicated in full or modified for purpose. This includes copyright material, including video or sound recording, livestreaming events, written works created or artistic works or performances in connection with the sport or event.

Personal information may include identifying each person who contributed to the creation.

**Purpose of the consent**

This consent form relates to representative school sport events run by Queensland School Sport and Regional School Sport offices. Calendars of representative school sport events can be found via their respective websites at <https://queenslandsschoolsport.education.qld.gov.au/>

It is the department's usual practice to take photographs or record images and occasionally publish limited personal information and materials for the purpose of promoting Queensland education and Queensland School Sport. The department often works with third party providers such as sporting organisations, contractors and community volunteers in facilitating school sport events which may involve disclosing personal information to those third parties. For full details of the purposes of the consent, please refer to section 3 of the consent form.

The consent form provides consent for personal information and a licence for materials to be published online or in other public forums. The department needs to receive consent in writing before it uses or discloses an individual's personal information or materials in a public forum. The attached form is a record of the consent provided.

**Voluntary**

It is your choice whether to give consent.

If you choose not to give consent, your child will still be able to participate in representative school sport. Your child will not be identified and images or recordings of them will not be published.

The department cannot guarantee your child's image will not be recorded by non-affiliated entities or individuals while participating in representative school sport events, due to them being spectator events.





### **Consent may be withdrawn**

Consent may be withdrawn at any time by you.

If you wish to withdraw consent please notify the departmental contact in writing (for example by email or letter). The department will confirm the receipt of your request if you provide an address.

The department will endeavour to take down content that is in its direct control however, published information and materials by external organisations – for example the media – is out of the department's control.

Due to the nature of the internet and social media (which distributes and copies information), it may not be possible for all copies (including images and materials), to be deleted or restricted from use once published.

### **Media sources used**

The department publishes images and materials on a range of social media sites, websites and traditional media sources subject to your consent. For a list of websites and sources where images and materials may be published for representative school sport, please see <https://queenslandsschoolsport.education.qld.gov.au/sports-information/information-and-privacy-management> and follow the link/s to your specific sport.

### **Engaged third party providers**

The department will engage with a range of third party organisations and contractors during the course of the representative school sport program. These third party providers include sporting organisations, commercial printers and merchandise providers, commercial photographers and videographers, travel agents, and volunteers. Personal information may be disclosed to, used and published by these third parties in accordance with the consent form.

For a full list of third parties to whom the department may disclose personal information and/or materials, please see <https://queenslandsschoolsport.education.qld.gov.au/sports-information/information-and-privacy-management> and follow the link/s to your specific sport.

### **Duration**

The consent is until 19/2/2022 unless you decide to withdraw your consent.

### **Who to contact**

If you have any questions or wish to withdraw consent please contact School Sport South Coast [SouthCoastSchoolSport@ged.qld.gov.au](mailto:SouthCoastSchoolSport@ged.qld.gov.au) .

Please retain this letter for your records and return the signed consent form.

Regional School Sport Officer  
South Coast School Sport | South East Region  
Department of Education





purpose, commercial or otherwise, required by operators of the websites as a condition of uploading the personal information or materials (DoE may need to accept contractual obligations that are perpetual and irrevocable in uploading material to such websites); and transfer of the personal information outside of Australia in the course of the operation of the website.

- (c) Event merchandising and memorabilia
  - o Products may be complimentary (e.g. event programs) or available for purchase by participants of representative school sport events (e.g. team photographs, action photography, videography, t-shirts) which involve disclosure of personal information to external suppliers.

**Third party organisations, contractors and volunteers**

Personal information and/or materials may be disclosed by DoE to the following third parties:

- **Commercial photographers and videographers**
- **Commercial printers and merchandise providers**
- Sporting organisations as authorised by DoE
- **Technical support providers**
- **Third party software and application providers**
- Travel agents, airlines and accommodation providers
- non-employee volunteers as authorised by DoE to assist with facilitation, organisation and administration of representative school sport events, in roles including but not limited to coaches, managers, convenors and team marshalls .

(Refer to the definitions section of this form for more detail about third parties)

It is important that you understand that if providing consent for DoE to disclose your personal information to third party organisations or services, this will include private companies hosted offshore or outside of Australia. This means that data that is entered to register for these third party software and application provider sites, including the Individual's personal information, will be transferred outside Australia and stored on servers based in other countries and therefore not subject to Queensland or Australian privacy laws. Before you complete this consent form we strongly advise that you understand the purposes for which these third party software and application providers collect this information, what will be done with it, who else may have access to it and where the data is stored. Further information can be found on <https://queenslandschoolsport.education.qld.gov.au/sports-information/information-and-privacy-management>, refer to each application/s and website's terms and conditions and/or privacy policy.

**4 TIMELINE FOR CONSENT**

Consent applies until 10/12/2022 or until you decide to limit or withdraw consent.

During the school year there may be circumstances where the DoE may seek additional consent. If this consent form, or attachments are updated during the period of consent, the department will provide you with information advising of the changes or updates and seek confirmation of continued consent.

**5 CONSENT AND AGREEMENT** *To record the consent please sign the top of the following page*

**► CONSENTER – for the person giving consent**

I am (tick as applies):

- parent/carer of the identified person in section 1
- the identified person in section 1 (if an individual, independent student, teacher or volunteer)



I have read the explanatory letter, or it has been read to me. I have had the opportunity to ask questions about it and any questions that I have asked have been answered to my satisfaction. By signing below, I consent to DoE recording, using and/ or disclosing (publishing) the personal information and materials for the Approved Purposes identified in section 3.

I acknowledge that I will not be paid for giving this consent nor will a payment be made for the use of personal information or material.

By signing, I also agree that this Consent Form is a legally binding and enforceable agreement between the consenter, DoE and the State. For the benefit of having the materials (detailed in section 2) promoted as DoE may determine, I grant a licence for such materials for this purpose. I acknowledge I remain responsible to promptly notify DoE of any third party intellectual property incorporated into the licensed materials.



# Consent Form Queensland School Sport – Representative school sport

Print name of student .....

Print name of individual/consenter .....

Signature or mark of individual/consenter .....

SIGN HERE

Date .....

Signature or mark of student (if an independent student) .....

SIGN HERE

Date .....

### SPECIAL CIRCUMSTANCES

In many circumstances only the above signatures are necessary. However there may be special circumstances that could apply. Examples include where the form is required to be read out (whether in English or in an alternative language or dialect). Another occasion may be where the consenter is an independent student and under 18.

#### ► WITNESS – for consent from an independent student or where the explanatory letter and Consent Form were read.

I have witnessed the signature of an independent student, or that the accurate reading of the explanatory letter and the Consent Form was completed in accordance with the instruction of the potential consenter. The individual has had the opportunity to ask questions. I confirm that the individual has given consent freely and I understand the person understood the implications.

Print name of witness .....

Signature of witness .....

Date .....

SIGN HERE

#### ► Statement by the person taking consent – when it is read

I have accurately read out the explanatory letter and Consent Form to the potential consenter, and to the best of my ability made sure that the person understands that the following will be done:

1. the identified materials will be used in accordance with the Consent Form
2. reference to the identified person will be in the manner consented
3. in accordance with procedures DoE will cease using the identified materials from the date DoE receives a written withdrawal of consent.

I confirm that the person was given an opportunity to ask questions about the explanatory letter and Consent Form, and all the questions asked by the consenter have been answered correctly and to the best of my ability. I confirm that the individual has not been coerced into giving consent, and the consent has been given freely and voluntarily.

A copy of the explanatory letter has been provided to the consenter.

Print name and role of person taking the consent .....

Signature of person taking the consent .....

Date .....

SIGN HERE

### Privacy Notice

The Department of Education (DoE) is collecting your personal information on this form in order to obtain consent for the use and disclosure of you and your child's personal information. The information will be used and disclosed by authorised departmental employees for the purposes outlined on the form. Also personal information may be used or disclosed to third parties as authorised in this form or where authorised or required by law. This information will be stored securely. If you wish to access or correct any of the personal information on this form or discuss how it has been dealt with, please use the contact details identified in the Introduction to the Consent Form.

## **DEFINITIONS**

**Approved Purposes** has the meaning given in section 3 of this Consent.

**Commercial photographers and videographers** are third party contractors engaged by the department to provide photography and videography services at representative school sport events. They have a contract with the department, agreeing to the department's terms and conditions. Photography and videos may be published on the commercial photographer/videographer's website for display or retail sale. A list of Commercial photographers and videographers are set out at <https://queenslandsschoolsport.education.qld.gov.au/sports-information/information-and-privacy-management>

**Commercial printers and merchandise providers** are third party contractors engaged by the department to provide printed materials and merchandise at representative school sport events. They have a contract with the department, agreeing to the department's terms and conditions. A list of Commercial printers and merchandise providers are set out at <https://queenslandsschoolsport.education.qld.gov.au/sports-information/information-and-privacy-management>

**Consent** means this signed document.

**The department or DoE** means the Department of Education (Queensland).

**Individual** is the person whose Personal Information and/or Materials consent is being sought for. The Individual is identified in section 1 of this Consent.

**Materials** are those specifically listed in section 2 of this Consent.

**Personal Information** means information (including captured electronically in databases) and images recorded in a material form (e.g. paper) or not, about a person whose identity is apparent, or can reasonably be ascertained, from the information that is specifically listed in section 2 of this Consent.

**Queensland School Sport (QSS)** is the Department of Education unit that administers the representative school sport program in Queensland. For the purposes of this consent form, Queensland School Sport also includes the Regional School Sport program.

**Sporting Organisations** are third party local, state and/or national organisations who administer, support and promote a specific sport. These organisations are recognised and may receive funding from the state and/or federal government. They collaborate with, and support Queensland School Sport to deliver representative school sport events. A list of Sporting Organisations are set out at <https://queenslandsschoolsport.education.qld.gov.au/sports-information/information-and-privacy-management>

**Sporting Organisation Personal Identification Number** is a number created by some Sporting Organisations. It is used to administer an Individual's involvement in that particular sport. Students are requested to have a sporting organisation number and as such, requested to apply for a sporting organisation personal identification number if they do not already have one. The list of representative school sports using a sporting organisation personal identification number are set out at <https://queenslandsschoolsport.education.qld.gov.au/sports-information/information-and-privacy-management>

**Technical Support Providers** are individuals/organisations engaged by the department to provide a service for the operation of the representative school sport program.

**Third party software and application providers** of the following software and applications currently used by DoE Queensland School Sport and relevant Sporting Organisations are set out by event at <https://queenslandsschoolsport.education.qld.gov.au/sports-information/information-and-privacy-management>

This code of conduct sets out what is expected of students, parents and spectators in terms of participating in **School Sport South Coast (SSSC)** events, and the range of consequences for breaching the code.

### AS A TEAM MEMBER'S

- Take responsibility for your own conduct and performance
- Compete by the competition conditions and rules.
- Never argue with the Judge's, Referee's or Umpire's decision.
- Control your temper – no criticism by word or gesture.
- Work equally hard for yourself and your team – your team's performance will benefit and so will your own.
- Be a good sport. Encourage and support your team members.
- Show respect for yourself, your team mates, officials, your opponents and their skills.
- Behave in a manner that respects the rights of others.
- Behave in a manner that respects the rights of others regardless of mediums of communication used e.g. digital mediums such as Twitter, Facebook, email and texts.
- Smoking, drinking of alcoholic beverages or the use of any illegal substances is strictly forbidden.
- Entering or remaining upon restricted licensed premises unless under the supervision of team officials is strictly forbidden.
- Going to bed at a reasonable hour will assist your own and your team's performance.
- Wearing the official team uniform at all times, as directed by team management / officials.
- Check - in and check - out with team management / officials each day.
- Stay in the designated team area and support other team members during times when I am not competing
- Follow all directions of team management / officials
- Ensure that you have telephone numbers of team managers at all times when I am not with the team.

### AS A GUEST IN MOTELS, COLLEGES, CARAVAN PARKS & SURF CLUBS ETC.

- Check for any damage to premises on arrival and notify your team official.
- Keep your room tidy.
- Do not leave the accommodation area without permission from the team manager.
- Be aware of which teacher is on supervision duty.
- Know where your team officials are staying.
- Where toilets/shower/laundry facilities are away from sleeping areas, it is advisable to attend in pairs.
- Mixed sharing of rooms is not permitted.

### BREACH OF THE CODE

*Team managers may deal immediately with any breaches of this code by imposing appropriate consequences, including not playing remaining fixtures, notification of parents, and being sent home at your parents' cost. School Sport South Coast Board (SSSCB) is responsible for imposing any longer term consequences.*

*Furthermore, SSSCB may provide a report to your school and you may be subject to discipline in accordance with the Education (General Provisions) Act 2006 (EGPA).*

*Students will be afforded natural justice in respect of breaches of this code and for any discipline under the EGPA*

This code of conduct sets out what is expected of students, parents and spectators in terms of participating in School Sport South Coast (SSSC) events, and the range of consequences for breaching the code.

### PARENT'S CODE OF CONDUCT

- Cooperate with the school to achieve the best outcomes for your child.
- Support team and event officials in maintaining a safe and respectful learning environment for all students.
- Maintain positive relationships with team officials regarding your child's learning, wellbeing and conduct.
- Encourage participation by your children.
- Provide a model of good sportsmanship for your child to copy.
- Be courteous and constructive in your communication with players, team officials, game officials and sport administrators.
- Encourage honest effort, skilled performance and team loyalty.
- Make any new parents feel welcome on all occasions.
- Do not interfere with the conduct of any events.
- Behave in a manner that respects the rights of others regardless of mediums of communication used e.g. digital mediums such as Twitter, Facebook, email and texts.

### SPECTATOR'S CODE OF CONDUCT

- Demonstrate appropriate social behaviour.
- Remember children play for enjoyment. Don't let your behaviour detract from their enjoyment.
- Let game officials conduct events without interference.
- Support skilled performances and team play with generous applause.
- Demonstrate respect for opposing players and their supporters.
- Behave in a manner that respects the rights of others regardless of mediums of communication used e.g. digital mediums such as Twitter, Facebook, email and text.

### BREACH OF THE CODE

*Team managers and event organisers may deal immediately with any breaches of this code by warning offenders about their conduct, asking offenders to leave venues, and calling police to intervene where necessary. Queensland School Sport is responsible for imposing any longer term consequences such as written warnings, or barring attendance at future events for a period or indefinitely.*

*Parents and spectators should note that it is an offence to insult (meaning "to treat insolently or with contemptuous rudeness, to abuse") an officer of a state educational institution - Section 333 Wilful Disturbance, of the Education (General Provisions) Act 2006 (EGPA).*

*Parents and spectators will be afforded natural justice in respect of breaches of this code and for any discipline under the EGPA*