

Bacchus Marsh Grammar

The Learning Hub and Sports Hub Enrolment Form 2017



One enrolment form per child

Information on this record is for both the Learning Hub and the Sports Hub only. No details will be released to other persons or authorities without Parent/Guardian permission.



Learning Hub

Please tick the days you would like to register your child for the Learning Hub program:

MONDAY TUESDAY WEDNESDAY THURSDAY FRIDAY OCCASIONAL



Sports Hub

Would you like to register your child for Sports Hub in 2017 (please tick) YES NO

Sports Hub registrations will open on the myBMG Parent Portal at the beginning of each term. This form registers your interest and formalises the personal and medical information.

Student Details

Family Name: _____

First Name: _____

2017 Year Level: _____

Date of Birth: _____

/

/

(dd/mm/yyyy)

Sex: M / F

Address: _____

Parent/Guardian 1: Name: _____

Contact numbers: _____

Parent/Guardian 2: Name: _____

Contact numbers: _____

Emergency Contacts (If parents are unavailable for contact)

Please ensure you list at least one emergency contact person (relation, neighbour, friend).

Contact 1: Name: _____

Address: _____

Phone numbers: _____

Relationship to the student: _____

Contact 2: Name: _____

Address: _____

Phone numbers: _____

Relationship to the student: _____

Collection Arrangements

Who will normally be collecting your child from either the Learning Hub or Sports Hub?

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Student Medical Information

Hospital Fund: Yes No If yes, Name of Fund: _____

Ambulance Cover: Yes No If yes, Number: _____

MEDICARE Number: _____

Doctors Name: _____

Contact Number: _____

Confidential Medical Report

This report is compiled to assist us, in case of any eventuality with the children. All information is held in confidence. If you answer yes to any of the following, the Program Coordinator will distribute another specific medical condition form to be completed by the Parent/Guardian prior to commencement in the Learning Hub or Sports Hub. These are in addition to School administered information forms.

Please tick if your child suffers from any of the following:

Fits of any type Heart Condition Blackouts Migraine

Allergies Dizzy Spells Sleep Walking Asthma

Food Other: _____

Allergies:

Penicillin Drugs Other: _____

Date of Last Tetanus Immunisation: ____/____/____ (dd/mm/yyyy)

Anaphylaxis Has your child been diagnosed at risk of anaphylaxis? Yes No

Does your child have an auto injection device (eg EpiPen®)? Yes No

Parental Consent:

- I give permission for my child _____ to participate in the Learning and Sports Hub programs.
- I acknowledge and agree that the School's normal behaviour management and disciplinary procedures will apply and that the Supervising teacher will apply these procedures during the conduct of the Activities.
- I have provided all information necessary for teachers to plan safe and reasonable health care support for my child. This includes, if relevant, information about any activity modifications my child may require for medical reasons.
- I consent to my child's doctor or medical specialist being contacted by medical personnel in an emergency.
- In the event of an accident or illness and contact with me being impracticable or impossible, I authorise the supervisor to arrange whatever medical or surgical treatment a registered medical practitioner considers necessary. I will pay all medical and dental expenses incurred on behalf of my child.
- The information, recording, reproducing and publishing images of the Sports Hub program at work. The images may include photographic, video and audio representations of my child. The images may be reproduced and published by the BMG in BMG publications, posters, presentations, promotional broadcasts, promotional events, reports and BMG websites in any and all media.
- I acknowledge and agree that the School collects personal information for the purposes of conducting the activities in both the Learning Hub and Sports Hub.

Privacy Collection Notice

Under the Privacy Act (the Act) Bacchus Marsh Grammar is required to provide you with certain information as to how we protect your privacy and how we comply with the requirements of the Act and the 13 Australian Privacy Principles (APP's). This information is set out in our Privacy Policy which is available on the Bacchus Marsh Grammar public website (www.bmg.vic.edu.au) and also available in hard copy upon request by contacting the Bacchus Marsh Grammar Privacy Officer at privacy@bmg.vic.edu.au.

Parent/Guardian Name: _____

Parent/Guardian Signature: _____

Date: _____