

## 7 ADP Nerang Aquatics Centre

7 September 2021

Dear Parent/Caregiver

During Term 4 our ADP students will study aquatics and injury prevention. This unit provides an opportunity for students to not only improve their safety in and around water, but to also gain valuable aquatic skills, which are transferrable from recreation activities right through to competition environments.

Nerang Aquatic Centre will accommodate ADP students in their aquatic and injury prevention units. A range of specialists in their field will provide students a wealth of knowledge in and around pool lifeguarding skills and safe emergency responses. Miss Donnelly is a qualified Austswim and Swim Coach and will improve student's stroke development, swim fitness and water awareness.

Dates of Activity: Every Friday, commencing 8 October to 26 November 2021  
Venue: Nerang Aquatic Centre, 34 Martin Street, Nerang  
Transport: Walking

All students are required participate as this is part of the ADP curriculum.

Departure Time: 8:50am (from NSHS bus bay)  
Return to school: 10:40am (to NSHS bus bay)

Students are to bring: Sunscreen, bottle of water and a hat  
NB: students require appropriate swim attire, swimming cap and goggles, towel and a bag to carry all swim gear in (no goggles or cap = no swim)  
Food arrangements: Students need to bring their own lunch, to be eaten on route to the venue  
Clothing: Full Sports uniform

If you have any enquiries please do not hesitate to contact Sonia Donnelly on 5503 7888 or [sdonn32@eq.edu.au](mailto:sdonn32@eq.edu.au).

Cameron Puddey  
Head of Department

**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 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.

**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.

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Teacher Responsible: *Sonia Donnelly*

ID: 521004

Consent:

By signing this form 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 does not have personal accident insurance cover for students.
- I understand that I must have all annual school fees paid for my child's participation in the 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.
- I accept liability for all reasonable costs incurred by the Department of Education in obtaining such medical assistance or treatment and undertake to reimburse the Department of Education the full amount of those costs.
- I have provided the school all relevant details of my child's medical or physical needs on enrolment.
- I have provided relevant updated medical information to: [admin@nerangshs.eq.edu.au](mailto:admin@nerangshs.eq.edu.au).

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I give consent for my child, \_\_\_\_\_, to participate in the 7ADP Nerang Aquatic centre visit each Friday from 8 October to 26 November 2021.

Parent/Carer Name: \_\_\_\_\_ (Please Print)

Parent/Carer's Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_