

EXCURSION PERMISSION FORM - CHILDCARE SERVICES

Child's Full Name: _____ Date of Birth: _____

Childcare Centre Details:

Centre Name: _____

Address: _____

Phone Number: _____

Excursion Details:

Excursion Name/Activity: _____

Excursion Location: _____

Departure Time: _____ Return Time: _____

Transport Details: _____

Emergency Contact Information:

Name: _____ Relationship: _____

Phone Number(s): _____

Alternate Phone Number(s): _____

Medical Information:

Allergies / Medical Conditions: _____

Medications to be administered during excursion (if any): _____

Special Needs or Requirements: _____

Consent and Acknowledgement:

I, the undersigned, am the legal parent/guardian of the child named above. I hereby give permission for my child to attend and participate in the excursion named above, organized by the childcare centre. I acknowledge and accept that while all reasonable care will be taken, the childcare centre and its employees or agents cannot be held responsible for any injury, loss, or damage incurred during the excursion except where caused by their negligence. I confirm that all medical information provided is accurate and that I have provided all necessary medications and instructions for my child's care during the excursion. I give permission for emergency medical treatment to be sought if required.

Liability Waiver:

To the fullest extent permitted by law, I release and indemnify the childcare centre, its employees, agents, and volunteers from all liability for any claims, losses, damages, or injuries arising out of or in connection with the excursion. This waiver does not exclude or restrict any rights or remedies that may not be lawfully excluded or restricted under Australian law.

Privacy Statement:

The childcare centre will collect and use personal information contained in this form for the purpose of organizing and managing the excursion, including emergency situations. Personal information will be handled in accordance with the Privacy Act 1988 (Cth) and relevant privacy policies. If you have any questions about the handling of personal information, please contact the childcare centre.

Parent/Guardian Details:

Full Name: _____
Relationship to Child: _____
Phone Number: _____
Email Address: _____

Signatures:

Parent/Guardian Signature

Childcare Centre Representative Signature

Signature: _____

Signature: _____

Printed Name: _____

Printed Name: _____

Date: _____

Date: _____

Original source of this document:

<https://legaltemplates-au.com/excursion-permission-form-childcare/>

Did you find this template helpful?

Find more updated templates at:

<https://legaltemplates-au.com/>

[View more templates](#)

This template is intended exclusively for personal, non-commercial use.
If distributed or published, the source must be mentioned.

This template is provided for guidance only and does not constitute legal advice.
It is recommended to consult a legal professional for each specific case.