When your child is invited to attend an incursion, excursion, sporting event or other activity requiring parental / guardian consent, you will be sent an email from Ballajura Community College asking you to provide consent for your child to attend.

The following is a step-by-step process on how to do this.

If you have any questions please contact the College on 9262 7777.

## Step 1 - Email will be sent from Ballajura Community College

You will receive an email similar to the one below from the College. It will provide you with an overview of the event, the date, time, transport (if applicable), dress code and venue.

\_\_\_\_\_

From: Ballajura Community College - [MCBSchools] <<u>admin@mcbschools.com</u>>
Sent: Monday, 21 February 2022 12:09 PM
To: Ballajura Community College <<u>Ballajura.CC@education.wa.edu.au</u>>
Subject: Ballajura Community College - Invitation for Mary AA Poppins



Dear Mr Peter Pan,

Mary AA Poppins has been invited on an Academic excursion.

## Monday 30 May, 2022 5:00 PM to 10:00 PM

# **Drone Light Show**

Notes: Students must bring

- hat
- own food and drinks
- something to sit on such as picnic blanket

Please note that this event includes flashing lights **Information:** Travel to Perth to watch the City of Perth drone light show

This is a compulsory excursion



Transport will be provided, departs at 05:00 PM and returns at 10:00 PM



School Uniform

<u> (</u>Venue



1

🋕 RSVP

Sunday, May 29 2022



## Step 2 – Click CONFIRM ATTENDANCE

This will take you to the Consent2Go portal where a summary page of the event will be shown – exactly the same as shown in the email – together with 2 buttons to advise if your child is

- ATTENDING
- NOT ATTENDING

ŵ	
Û	<b>Transport</b> Ballajura Community College transport will be provided, departs at 05:00 PM and returns at 10:00 PM
Û	Dress School Uniform is required
Û	<b>Venue</b> Langley Park, 103 Birdiya Dr, Perth WA 6004, Australia
Û	Excursion numbers Limited to 1
Ŵ	Tuesday, 22 February 2022
	Mary is attending
	Mary is not attending

Step 3 – Click on the blue OR red button to advise if your child is attending the event OR is not attending the event

The first time you use Consent2Go you will be asked to confirm the date of birth of your child. This is an added security measure.

Verify Student Date of Birth	×
As this is the first time this email address has been used to access the system, we need you to verify the details below.	
Please enter the date of birth of Mary AA Poppins:	
Close	bmit

You must enter your child's date of birth to proceed.

#### Step 4 – Excursion details

The process for confirming attendance for the event is shown at the top of the screen.

- 1. Parent Information
- 2. Care Details
- 3. Medical Conditions
- 4. Permissions
- 5. Review

#### **EXCURSION INVITATION**



## <mark>Step 5 – Parent / Guardian Details</mark>

Review the details that show on the *Parent / Guardian Details* screen. Please complete any missing information and/or update any incorrect details on this screen.

#### Step

Parent/Guardian Details	Undo Changes ${old C}$
Title	
Mr	
First name	
Peter	
Surname	
Pan	
Work phone number	
<b>20</b> • (08) 9262 7777	
Mobile	
<b>==</b> +61 ·	
Email	
ballajura.cc@education.wa.edu.au	

#### Step 6 – Address and Home Phone

Please review and complete any missing address and contact information and/or update the information if required.

#### Address and Home Phone

Undo Changes

Home phone number
<b>™ </b> (08) 9262 7777
Residential Address
123 Neverland
Suburb
Perth
State
WA
Postcode
6000
Country
Australia 🗸

#### Step 7 – Click NEXT to move forward



#### Step 8 – Health & Medical Information

It is <u>essential</u> that the medical and care details of your child are up to date and accurate. Failure to provide the College with accurate information regarding the health and medical requirements of your child may impact the ability of our staff to appropriately care for your child.

All medical conditions must be supported by a relevant Medical Plan from a doctor or medical practitioner.

#### Step 9 – MEDICARE INFORMATION

The Medicare Details of your child must be entered.

Enter Mary's Medicare Details:	
Enter mary 3 medicare Details.	
Medicare Number	
1234 56789 0	0
Medicare Line	
2	0
Valid To	
01/26	0
Medicare Card	
No Medicare Card	
Medicare Card details unknown	

#### Step 10 - DIETRY REQUIREMENTS

If applicable, the dietary requirements of your child must be noted together with the appropriate care details.

You are able to enter more than 1 Dietary Requirement.

Medicare Card		
No Medicare Card		
Medicare Card details unknown		
Dietary requirements		
No Does Mary have	any non-medical dietary requirements?	
Halal	0.	
None Vegan Hatal Pescetarian No perk No datry Fasting Kasher No beef Gluten-Free Lactose Intolerant		Edi 🖊
<ul> <li>Surgery Mobile</li> </ul>		
Reck Next		

## Step 11 - MEDICAL CONTACT DETAILS

The details of your child's medical doctor must be entered - including contact details and address.

Undo Changes ${old C}$ 

Enter Medical Contact Details:
Family Doctor Name
Dr Hook
Family Doctor Surgery Name
Dr Hook & Sons
Surgery Mobile
· (08) 9222 2222
Address
1234 Neverland Street
Suburb
Perth
State
WA
Post Code
6000

## Step 12 - MEDICAL CONDITIONS

If your child has

- a) a medical condition that may impact their ability to participate in events and/or excursions OR
- b) a medical condition that may require care and/or medication

then this information <u>must</u> be provided in this section.

Click on **ADD MEDICAL CONDITION** and then select the appropriate medical condition from the list shown.

If your child's medical condition is not shown, please select OTHER.

#### Note - the list below shows just a few of the many medical conditions able to be selected. Medical Conditions

Yes No Does Mary have any medical conditions?	
Please check the medical conditions from the drop-down menu (below) to ensure all medical conditions are accurately recorded	
Add Medical Condition +	
Start typing medical condition	۹
Acute Bronchitis	
ADD / ADHD	
Allergy to Environment	
Allergy to Food	
Allergy to Medication	
Anaphylaxis	
Anorexia	
Anxiety / Panic Attacks	
Arthritis	
Aspergers Syndrome	

In the *example* below, ANAPHYLASIS has been selected which requires additional information to be entered **AND** an Action Plan to be uploaded.

All Action Plans must be signed by a Dr or a Medical Practitioner.

Medical Conditi	ons
Yes No Does	Mary have any medical conditions?
Please check the medi	cal conditions from the drop-down menu (below) to ensure all medical conditions are accurately recorded
Add Medical Condition	on +
Anaphylaxis	
Allergens	
Other	T
Chili	
Medication	
Antihistamine	•
	Antihistamine
As Required	Take 2 x tablets as required if exposed to chili
Daily	
Emergency	
	S Self Administered under supervision
	Expiry Date
	dd/mm/yyyy

Care Instructions	
	li li
Yes No	Experiences breathing difficulties during an allergic reaction??
Yes No	Able to consume foods that may contain traces of the allergen?
Condition History	
Yes No	Has been hospitalised for Anaphylaxis in the past 12 months?
Yes No	Has Anaphylaxis interfered with physical activity in the past 12 months
Yes No	Has there been any reaction in the past 10 years?
Multiple accide	ntal food exposure events
	ĥ

Condition Management Documents/Action Plan

# Once the medical information has been updated and saved, your child's medical details will appear in summary form as shown below.

EXCURSION IN	VITATION			
Parent Information	Care Details	Medical Conditions	4 Permissions	5 Review
Medical Conditions				
Anaphylaxis Life Threatening			<b>(</b> )	/iew 🕜 Edit 💼 Remove
Add Medical Condition +				
Parents/Guardians are required during the activities.	d to make arrangements w	ith Ballajura Community Co	llege for the safekeeping and ha	andling of medications
Back Next				

#### Step 13 – SWIMMING ABILITY

#### Enter the highest level of swimming ability obtained by your child.

Swimming Ability
Swimming Ability
Competent: 50m - 200m 🗸
Swimming Certificate
Water Discovery ~
Date Certificate Achieved
01/01/2019
Swimming Ability Comments

Swimming Ability Comments

#### Step 14 – OTHER INFORMATION

#### Other information



Does Mary have any temporary conditions that Ballajura Community College needs to be aware of e.g. flu, virus, injury, etc?

This information is not stored/retained and is for this event only



Does Mary need to use or carry any medication for the temporary conditions? This information is not stored/retained and is for this event only

I give consent for Mary to receive emergency medical treatment if required, at school or at school related activities including, school excursions, sports days, retreats and camps. I give permission for Ballajura Community College to pass this information to approved third parties (e.g.Doctor, Hospital, Ballajura Community College Service Providers).

#### Review

I acknowledge that this event will be held in accordance with any current COVID-19 Public Health Orders and in accordance with school policies and procedures. I acknowledge and accept that there is a risk that my child may be exposed to COVID-19 whilst attending and participating at this event. I confirm that my child will not attend if displaying any symptoms of illness, and/or directed to isolate under public health orders.

I have provided Ballajura Community College with the current contact details and health status of Mary AA Poppins. I acknowledge that it is my responsibility to inform Ballajura Community College of any changes at all times.

Please click the below SUBMIT button to finalise your permission

Parent/Guardian:

Mr Peter Pan

Emergency Contact Name: Father

Emergency Contact Number: (08) 9262 7777

Family Doctor Surgery Name: Dr Hook & Sons

Family Doctor Number: (08) 9222 2222

Family Doctor Number: (08) 9222 2222

Family Doctor Audress: 1224 Neverland Street

Medical Conditions

Ataphylaxis - La Treasent

Intergency Medical Treasent is authorised

Sentergency Medical Treasent is authorised

Perspectations

Parter Pan

Details have been successfully submitted. You will shortly receive a confirmation email. For further information please contact:

Rebecca TRELOAR-COOK

rebecca.treloar-cook@education.wa.edu.au

2 08 9262 7777

Thank you.