



KEPNOCK

STATE HIGH SCHOOL

learning • responsibility • respect

 Kepnock State High School
 twitter.com/KepnockHigh

PO Box 4310, Bundaberg South, Qld 4670
P 0741 311 888 F 0741 311 800
E principal@kepnockshs.eq.edu.au
W www.kepnockshs.eq.edu.au

HPE & Sport

Dear Parent/Carer

Welcome to Kepnock State High School and the Health and Physical Education (HPE) faculty. In Junior Secondary, HPE is a compulsory subject where students will participate in 2 or 3 lessons per week. HPE has practical and theoretical components that contribute to a student's academic results. The theoretical component covers personal development and health topics.

Each year students need to complete the attached Medical and Consent form. In Years 7, 8, 9 and 10, your child is involved in the key learning area of Health & Physical Education. Some students are involved in the Sports Development Program (SDP) for their HPE lessons.

In Years 11 and 12, physical education goes by one of three subject titles – Sport and Recreation, Certificate III in Fitness or Physical Education. Students choose to study these subjects only through personal choice. This implies they are going to participate fully in every activity.

Involvement in any physical activity comes with risk. Relative risk levels are listed below for activities conducted at Kepnock SHS.

Activities include: <u>Medium risk:</u>	Softball, cricket, netball, soccer, basketball, touch/ Oztag, volleyball, tennis, minor games, hockey, athletics, futsal, Ultimate Frisbee, athletic running events (sprints and middle distance) and long jump.
<u>High risk:</u>	Swimming, High jump, javelin, discus
<u>Extreme:</u>	<i>Surfing, Archery, rugby league - special parent letter will be sent home if student is involved.</i>

The HPE teachers at Kepnock promote good health, participation in physical activity and safe behaviours. Due to our health and safety expectations, it is important you complete a consent and permission form for your child to participate in the curriculum activities planned for your student's respective year level.

Our expectations of your student are – respect for all and participate in everything.

- **Ensure your student wears a hat.** Caps are not ideal, but acceptable. Full brim is best. We provide sunscreen for outdoor lessons.
- **Footwear must be lace up and safe for running.** Slip on shoes are NOT suitable. Nor are socks alone. Students can bring runners in their bags that can be put on for HPE. In most cases, the uniform shoes are suitable.
- **Swimwear is appropriate.** Swimwear should be sun safe and respectable. Students will not swim in their uniform shorts, nor their underwear. They will also have their own towel.
- **Participation.** Students are expected to participate to the best of their ability at ALL times. They are also expected to participate respectfully, both to other students and their teachers. Having a 'go' at everything is very much encouraged and supported. Non-participation must be explained by parent note.

If you have any queries about our HPE programs, or their content, please contact Ros Coombes (Head of Department - HPE & Sport) on 4131 1886.

Ros Coombes
HOD: HPE/Sport – Kepnock SHS

Staffroom: 41311886
Email: rcoom9@eq.edu.au





Please sign **THREE** sections – Medium Risk, High Risk and General sections.

A medical clearance is required for significant health concerns that impact on participation.

Personal Details/ Medical Conditions:

STUDENT NAME: _____ FORM CLASS: TBA

DATE OF BIRTH: _____

PARENT/ CARER NAME: _____ CONTACT PHONE: _____

MEDICAL CONDITIONS – ILLNESS/ INJURY AFFECTING PARTICIPATION.

A doctor's clearance form must be provided to allow HPE participation IF student has significant medical condition impacting on participation.

1. MEDIUM RISK CONSENT

I understand my student will be participating in Kepnock's HPE program which involves a range of the following medium risk activities.

*The activities include: **softball/ t ball, cricket, netball, soccer/futsal, basketball, AFL, touch/Oztag, volleyball, minor games, tennis, field hockey, ultimate Frisbee, athletic running events (sprints and middle distance) and long jump.***

I understand HPE teachers will manage the associated risk in accordance with departmental procedures and policies

I will encourage my student to participate safely and as fully as possible.

PARENT/ CARER SIGNATURE: _____

2. HIGH RISK CONSENT

I understand my student will be participating in Kepnock's HPE program which involves the following HIGH risk activities.

*The activities include: **Swimming and water ball games, javelin, discus.***

I understand HPE teachers will manage the associated risk in accordance with departmental procedures and policies. If my student has a health condition that impacts participation in HPE, I have also provided a medical clearance (doctor's certificate) with this consent form.

I will encourage my student to participate safely and as fully as possible.

Extreme risk activities – archery, surfing and rugby league will have a separate permission

PARENT/ CARER SIGNATURE: _____

3. GENERAL CONSENT.



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Privacy notice

The Department of Education 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, as applicable, s.426 of the Education (General Provisions) Act 2006 (Qld), the Information Privacy Act 2009 (Qld), and/or the Privacy Act 1988 (Cwlth).

The information will not be disclosed to any other person or agency unless the disclosure is authorised or required by law, or you have given the department permission for the information to be disclosed.

Activity risks and insurance

Please note that the Department of Education does not have personal accident insurance cover for children/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.

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 does not have personal accident insurance cover for students/children.
- I give consent for my child, (name) _____ in (Year) _____ to participate in the medium and high risk HPE activities listed previously and will provide a medical clearance for any health conditions that impact participation.
- In the event of an accident or illness, school staff may obtain or administer any medical assistance or treatment my child may reasonably require, including contacting my child's doctor.
- I accept liability for all reasonable costs incurred by the department in obtaining such medical assistance or treatment (including any transportation costs) and undertake to reimburse the department the full amount of those costs.
- I have provided the school all relevant details of my child's medical or physical needs on registration /enrolment and where relevant have updated this information.

Parent/Carer's name: _____ (Please print)

Parent/Carer signature: _____ Date: ____/____/____

Additional medical information

The school collected medical information about your child at registration/enrolment. This information is stored electronically in OneSchool. Please give full details of any new or updated medical information which may affect your child's full participation in the activity described in the form.

You may also wish to update/provide the following optional information*:

Name of child's medical practitioner: _____ Telephone No.: _____

Medicare No.: _____

Private Health Insurance Company (if applicable): _____ Membership No.: _____

*If a registration/enrolment form for your child was completed or updated since October 2012 and these details have not changed, this information will already be recorded in OneSchool.

☐ I would like this additional information about my child's medical information to be recorded in OneSchool records.

