



Permission to participate in activities and access resources

Special Religious Education YEAR 1 to YEAR 6 ONLY

Please mark which religious education class you would like your child to attend.

☐ Catholic (western)

☐ Non-religious education

☐ Muslim – Islamic Council of NSW

☐ Muslim – Islamic Charity Projects Australia

☐ Anglican and non-denominational including Protestant, Baptist, Uniting

PG Rated Texts (Documentaries/Movies)

I give permission for my childin class to view Parent Guidance (PG) Documentaries/Movies under the supervision of teachers.

.....
Parent/Guardian name

.....
Parent/Guardian Signature

.....
Date

Internet Permission Note

Please discuss this with your child and ask them to sign their name.

I understand that I may only use the Internet if I follow the rules listed below:

1. I may only use the Internet under the direction of my teacher.
2. I will only use the Internet to find information for my school work or communicate with others approved by my teacher.
3. I will observe all class Internet rules.
4. I will not send messages that are threatening or rude.
5. I will not provide any personal information such as phone numbers, addresses or names of family members or other students when using the Internet.

I understand that should I break any of these rules the use of the Internet will be taken from me.

.....
Student Signature

.....
Parent/Guardian Signature

.....
Date

Student Images

I give consent for my child's..... photograph or video image to be used on the school's Facebook page, school website, electronic and print promotional material.

☐ I **do not** give consent for my child's..... photograph or video image to be used on the school's Facebook page, school website, electronic and print promotional material.

.....
Parent/Guardian name

.....
Parent/Guardian Signature

.....
Date

Third party Consent

Student Name: Student Class:

I give **consent** / **do not consent** (Please circle the appropriate response) for the student listed above to participate in learning activities and access resources using Seesaw. I understand that this consent remains effective until I advise the school otherwise.

I acknowledge that my child must abide by the conditions of acceptable usage set out in the department's **Student use of digital devices and online services** and that any breach of this policy may result in disciplinary action in accordance with the school's disciplinary policy.

.....
Parent/Guardian name

.....
Parent/Guardian signature

.....
Date