

CONSENT AND MEDICAL FORM

Please complete this form as required.

I (parent/guardian name) as parent/guardian of (student name), give my consent for him/her to participate in the chosen workshop/s and agree to delegate my authority to the leaders involved. Such leaders may follow procedures to ensure the safety, well-being and successful conduct of the students as a group, or individually. In the event that my child damages or destroys property belonging to another person, I undertake to pay the cost of repairs or replacement as necessary.

I also authorise the leaders to obtain such medical assistance as they deem necessary should an accident occur, and agree to pay all medical expenses, including ambulance and pharmaceutical costs, incurred on behalf of the above student. **Parent/Guarian will be contacted in the first instance before proceeding.**

I submit the following medical information about the above student and include details of any limitations to be observed for the activity concerned.

QAGTC publishes Mindscape, a magazine for its members, which includes work by gifted children. Children whose work is published in Mindscape will receive a copy of the magazine and the opportunity to see their work in print! Please indicate below whether you and the participating student provide permission for QAGTC to use materials from Children's Challenge.

I/We give permission for copies of this student's work to be used in Mindscape.

I/We give permission for photographs of activities that include this student to be used in Mindscape.

Signed: (parent/guardian)

Date:

MEDICAL INFORMATION

Student Name
Student 2
& 3 if no medical issue

D.O.B.

School Year:

MEDICAL ISSUE	Select No/Yes	DETAILS
Heart problems		
Respiratory problems		
Allergies		
Travel sickness		
Blood pressure		
Recent operations		
Epilepsy		
Recent illness		
Injections, when given		
Drug reactions		
Drugs required		
Phobias		
Other		

Emergency Contact (name & address):

Emergency Mobile Phone:

If supervision of medication is required while at the workshop, please attach details indicating dosages and times and also alert QAGTC Medical Officer at registration.

INDICATION OF GIFTEDNESS FORM

QAGTC Challenge offers workshops for the gifted aimed at providing invaluable opportunities for gifted youngsters to experience the excitement of extending their learning in novel and engaging workshops where they will mix with like minds and be encouraged to explore their potential. Students are recognised as gifted when they can operate at levels of learning well above that which is normal for their age peers. Gifted education programs are designed to provide opportunities to engage with tasks achievable by students two years in advance of a gifted child's chronological age.

STUDENTS:

*Remember when you select a workshop that you will be working at a level **two years in advance** of the school-year level indicated—an exciting challenge for you!*

PARENTS, PLEASE NOTE:

Some indication of giftedness, or ability to work at advanced levels in greater depth and complexity, is required for your child/ren to participate in these workshops. It would not be fair on the participants to nominate children who are not capable of working at advanced levels. Nor would it be appropriate to expect leaders to lower the challenge level of their workshops to accommodate children who do not have high ability. We appreciate that some gifted children may not demonstrate high achievement at school and therefore we will accept parent nomination and signature.

PLEASE READ AND SIGN BELOW:

I acknowledge that the Challenge workshops are designed for gifted students who are capable of attempting work (not necessarily to the extent of mastery) approximately two years in advance of chronological age. I believe that my child/ren has high ability and will accept this challenge and strive to excel in the workshop/s.

Parent/Guardian's signature:

Final Notes and Checklist

- Registration:** Registration and payment completed www.qagtc.com.au
Indication of Giftedness, and Consent and Medical forms completed.
Emailed completed forms to office@qagtc.org.au
- Venue:** The website has a link to a locality map. (www.qagtc.com.au)
- Lunch:** Parents to provide children with their own drinks and lunch.
- Enquiries:** Please email all enquiries to: office@qagtc.org.au

Refund Policy: Cancellations must be in writing. A \$25 administration fee applies. Any further requests for refunds will be considered by QAGTC Management Committee. Registrations are transferable upon receipt of advice in writing.

Liability: Registration fees will be refunded in full if, due to unforeseen circumstances, Challenge is cancelled, or a workshop number is too small. In the event of industrial disputation, the Challenge organisers cannot be held responsible for losses incurred by participants. Please make your own personal insurance arrangements.