



Thorpdale Primary School 2966

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PARENT/GUARDIAN PERMISSION FORM

I,grant permission for my child..... to attend

1. In the event of any illness or accident, I authorize the teacher / parent in charge obtaining on my behalf of such medical assistance as my child may require. I accept all operations, blood transfusions and/or anaesthetic risks involved and the responsibility for payment of any expenses thus incurred.
2. In case of an emergency arising with respect to any individual child, attempts will be made to notify parents by telephone.

Signed: _____ Date: _____ Cost: _____