

## Routine Permission Form

I \_\_\_\_\_ (parent/guardian) give permission to my child's  
Educator (name) \_\_\_\_\_, to take my child/ren (name/s)  
\_\_\_\_\_, on the  
following routine transportation / excursion.

### Local School

Days attending: ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday

Pick-up Location: \_\_\_\_\_

Destination: \_\_\_\_\_

The reason the child is to be transported \_\_\_\_\_

Drop off time: \_\_\_\_\_ Pick up time: \_\_\_\_\_ Period of time which child is to be transported \_\_\_\_\_

The number of children involved in the transport: \_\_\_\_\_

Number of staff members supervising the children during the transportation: \_\_\_\_\_

Requirements for seatbelts or safety restraints in NSW have been met. **Yes / No**

Means of Transport: ☐ Walk ☐ Car ☐ Bus

### Local Park

Days attending: ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday ☐ Saturday ☐ Sunday

***This outing is subject to weather conditions. Please refer to my daily program to verify days and times of outing.***

Pick-up Location: \_\_\_\_\_

Destination: \_\_\_\_\_

Reason the child is to be taken outside the premises: \_\_\_\_\_

Activities to be undertaken by the child during the excursion: \_\_\_\_\_

Drop off time: \_\_\_\_\_ Pick up time: \_\_\_\_\_ Period of time which child is away from premises: \_\_\_\_\_

The number of children involved in the excursion: \_\_\_\_\_

Ratio of educators to children attending the excursion: \_\_\_\_\_

Number of staff members supervising the children attending the excursion: \_\_\_\_\_

Requirements for seatbelts or safety restraints in NSW have been met. **Yes / No**

Means of Transport: ☐ Walk ☐ Car ☐ Bus

**Local Shopping Centre**Days attending: ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday ☐ Saturday ☐ Sunday

Pick-up Location: \_\_\_\_\_

Destination: \_\_\_\_\_

Reason the child is to be taken outside the premises: \_\_\_\_\_

Activities to be undertaken by the child during the excursion: \_\_\_\_\_

Drop off time: \_\_\_\_\_ Pick up time: \_\_\_\_\_ Period of time which child is away from premises: \_\_\_\_\_

The number of children involved in the excursion: \_\_\_\_\_

Ratio of educators to children attending the excursion: \_\_\_\_\_

Number of staff members supervising the children attending the excursion: \_\_\_\_\_

Requirements for seatbelts or safety restraints in NSW have been met. **Yes / No**Means of Transport: ☐ Walk ☐ Car ☐ Bus**Local Library**Days attending: ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday ☐ Saturday ☐ Sunday

Pick-up Location: \_\_\_\_\_

Destination: \_\_\_\_\_

Reason the child is to be taken outside the premises: \_\_\_\_\_

Activities to be undertaken by the child during the excursion: \_\_\_\_\_

Drop off time: \_\_\_\_\_ Pick up time: \_\_\_\_\_ Period of time which child is away from premises: \_\_\_\_\_

The number of children involved in the excursion: \_\_\_\_\_

Ratio of educators to children attending the excursion: \_\_\_\_\_

Number of staff members supervising the children attending the excursion: \_\_\_\_\_

Requirements for seatbelts or safety restraints in NSW have been met. **Yes / No**Means of Transport: ☐ Walk ☐ Car ☐ Bus**Play Session**Days attending: ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday ☐ Saturday ☐ Sunday

Pick-up Location: \_\_\_\_\_

Destination: \_\_\_\_\_

Reason the child is to be taken outside the premises: \_\_\_\_\_

Activities to be undertaken by the child during the excursion: \_\_\_\_\_

Drop off time: \_\_\_\_\_ Pick up time: \_\_\_\_\_ Period of time which child is away from premises: \_\_\_\_\_

The number of children involved in the excursion: \_\_\_\_\_

Ratio of educators to children attending the excursion: \_\_\_\_\_

Number of staff members supervising the children attending the excursion: \_\_\_\_\_

Requirements for seatbelts or safety restraints in NSW have been met. **Yes / No**Means of Transport: ☐ Walk ☐ Car ☐ Bus

Other

Days attending: ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday ☐ Saturday ☐ Sunday

Pick-up Location: \_\_\_\_\_

Destination: \_\_\_\_\_

Reason the child is to be taken outside the premises: \_\_\_\_\_

Activities to be undertaken by the child during the excursion: \_\_\_\_\_

Drop off time: \_\_\_\_\_ Pick up time: \_\_\_\_\_ Period of time which child is away from premises: \_\_\_\_\_

The number of children involved in the excursion: \_\_\_\_\_

Ratio of educators to children attending the excursion: \_\_\_\_\_

Number of staff members supervising the children attending the excursion: \_\_\_\_\_

Requirements for seatbelts or safety restraints in NSW have been met. **Yes / No**

Means of Transport: ☐ Walk ☐ Car ☐ Bus

**NOTE:**

**Under No circumstances are routine or non-routine excursions to occur near or where there is any mass of water. This includes but is not limited to; the beach, pools, lakes, river etc. Trains are also not to be used as a mode of transport.**

**OUTINGS:**

I give permission for my child/ren to participate in outings to places such as schools, playgroup, shops, local parks, libraries or other places of interests (permission forms will have to be signed for allowing children to leave the service). **Yes / No**

**This form must be returned to Newton Family Day Care and the educator must complete a risk assessment PRIOR to children attending any excursion or transportation. A copy of the risk assessment as well as written policies and procedures for transporting children are available at the education and care service should you request to see them.**

Parent/Guardian Signature: \_\_\_\_\_

Educator Signature: \_\_\_\_\_

This consent is valid from: \_\_\_\_/\_\_\_\_/20 to \_\_\_\_/\_\_\_\_/20

**(MUST BE REVIEWED EVERY 12 MONTHS)**