## Excursion Permission Form – Routine (regular outing)

##### A family day care educator must ensure that a child who is being educated and cared for is not taken outside the residence or approved family day care venue on an excursion unless written authorisation has been provided by a parent or other person named in the child’s enrolment record. If the excursion is a regular outing, the authorisation is only required to be obtained once in a 12 month period or when any of the circumstances of the outing may have changed. A routine excursion is a journey undertaken regularly, for example trips to library, park or playgroup.

##### All sections of the Excursion Permission Form – Routine **must** be completed for **each** routine excursion destination. Up to 4 destinations can be used on this permission form.

**EDUCATOR TO COMPLETE**

|  |  |
| --- | --- |
| **Name of child/ren** | **Date of birth** |
|  |  |
| **Date of routine excursion permission** | **Agreement commences** |       |
| **Agreement ends** |       |
|  | **Destination 1**  | **Destination 2**  |
| **Destination location**  |       |       |
| **Reason for routine excursion** |       |       |
| **The proposed activities to be undertaken by the child/ren during the routine excursion****(link to EYLF and MTOP)** |       |       |
| **How often will the routine excursion occur?****Daily, weekly etc** |       |       |
| **Day/s the routine excursion will occur** |       |       |
| **Description of details per day:*** **start time and finish time/period of time child will be away**
* **pick up location/starting point**
* **Proposed route**
 |       |       |
| **The method and details of transport to be used for the routine excursion** |       |       |
| **Anticipated number of children attending the routine excursion** |       |       |
| **Anticipated ratio** |       |       |
|  | **Destination 3**  | **Destination 4** |
| **Destination location**  |       |       |
| **Reason for routine excursion** |       |       |
| **The proposed activities to be undertaken by the child/ren during the routine excursion****(link to EYLF and MTOP)** |       |       |
| **How often will the routine excursion occur?****Daily, weekly etc** |       |       |
| **Day/s the routine excursion will occur** |       |       |
| **Description of details per day:*** **start time and finish time/period of time child will be away**
* **pick up location/starting point**
* **Proposed route**
 |       |       |
| **The method and details of all transport to be used for the routine excursion** |       |       |
| **Anticipated number of children attending the routine excursion** |       |       |
| **Anticipated ratio** |       |       |
| **Details of the requirements for seat belts and safety restraints to be met****Include the type of child restraint available to suit size and age of child, and if the parent will be providing the restraint** |       |
| **Full names of adults who will accompany and/or be supervising the children on the routine excursions** |       |

|  |  |
| --- | --- |
| A risk assessment for each routine excursion has been prepared and sighted by the parent/authorised person | [ ]  yes [ ]  no |
| **Educator name** |       |
| **Educator signature** |  |
| **Date** |       |
| **Scheme** |  |

**PARENT or AUTHORISED PERSON TO COMPLETE**

|  |  |  |
| --- | --- | --- |
| I give my permission for my child/ren to participate in the routine excursions according to the details above. I have sighted the risk assessment for each routine excursion. | Destination 1Destination 2Destination 3Destination 4 | **[ ]** yes **[ ]** no**[ ]** yes **[ ]** no**[ ]** yes **[ ]** no**[ ]** yes **[ ]** no |
| **Parent/authorised person name** |       |
| **Parent/authorised person signature** |  |
| **Date** |       |
| **Contact phone number** |       |
| In the case of an emergency, this person will be available if I am unable to be contacted |
| **Name** |       |
| **Contact phone number** |       |