

Student Medical Details and Authorization

Student's Name: _____

My son/daughter has been immunized against (Please show year of immunization if known):

Date of last anti-tetanus injection: _____

Has your son/daughter been immunized against Hepatitis B? YES NO

My son/daughter is known to be allergic to: _____

Does your son/daughter suffer from asthma? YES NO

If YES, please give details of medication: _____

Is your son/ daughter currently being treated by a medical practitioner? YES NO

If YES, please give details and details of any medication: _____

Is your son/daughter suffering from an injury or condition that is likely to be aggravated by competition? YES NO

If YES, please give details: _____

List any other relevant medical history: _____

Is your son/daughter issued with his/her own Medicare card? YES NO

If NO, please state Medicare Card holder's name (This is the first name on the card): _____

State your son's/daughter's or family's Medicare Card number: _____

Detail any additional health benefits cover (e.g. private hospital, ancillary, dental, etc.):

Additional Health Insurance Company Name and Membership Number: _____

Does your son/daughter have a Personal Accident Insurance cover against accident/injury for competitions and associated activities

(e.g. training, travel, etc)? YES NO

If YES, detail the type of cover: _____

NOTE: It is the parents' responsibility to ensure that the student is adequately covered for Medical Hospital, Dental and Personal Accident & Injury Insurance. Metropolitan North School Sport cannot accept financial liability for any of these expenses.

I hereby authorize the obtaining on my behalf of such medical assistance as my son/daughter may require in the event of accident or illness and guarantee to meet any costs incurred.

I authorize the administering of anaesthetic if the medical officer attending deems this necessary.

Signed: **Date:**.....
(Parent/Guardian)

Education Queensland is bound by Information Standard 42 – Information Privacy. Education Queensland is collecting the information on this form for the purpose of facilitating the attendance of students at the event organised by the School Sport Unit. The information provided will not be used or disclosed for any other purpose and will be held securely and protected against unauthorised access. The information will be provided to staff on a need to know basis and the privacy of the individuals whose information is provided will be respected. If you wish to access or amend the personal information provided on this form, please contact the Team manager.