

Dear Families

As a parent of:

Please complete and return this form via the class office box by Friday, 12th March 2021.

CONSENT FORM FOR CHIEF EXECUTIVE APPROVED EARLY DISMISSALS

Please use block letters when filling out this form

STUDENT/CHILD'S NAME						
I:						
PARENT NAME						
give my consent for	r them to be dismissed ear	ly under the follo	wing conditions):		
 up to 1 hour Easter long v 	before the normal end of tweekend;	he school day on	the last school	day be	fore the	е
	before the normal end of the end of school terms;	he school day no	more than 4 tim	ies a ye	ear for	the
 up to 1 hour sports day; 	before the normal end of t	he school day for	the purpose of	an ann	ual sch	nool
 up to 1 hour wide sport ca 	before the normal end of t arnival; and	he school day for	the purpose of	an ann	ual dis	trict-
declared by the school a	before the normal end of t the State Emergency Servi re considered at risk due t oning on days of extreme	ices, or where the o the absence, loo	health and safe calised failure o	ety of th	e child	Iren at
dismissals through th	ed in advance (minimum 1 m ne normal communication ch nool newsletters and the sch	annels used betwe	-			•
For early dismissals students are dismiss	relating to 'extreme heat' sceed.	enarios parents will	be notified as so	on as p	ossible	before
Agreement						
	wledge that my consent (if p nd attending at the school ur by telephone.					
Signed:			Date -	э:	/	/

