



Confidential Medical Information for Canine Comprehension Programs.

Canine Comprehension will use this information if your child is involved in a medical emergency. All information is held in confidence. The medical information on this form must be current when program is run.

Parents are responsible for all medical costs if a student is injured on a school approved program.

Program name (e.g. Holiday program/ school program):

Date(s):

Student's full name:

Date of birth: Year level:

Parent/guardian's full name:

Emergency telephone numbers:

Allergies

Please advise if your child is allergic to any of the following: animals, dogs, Penicillin, Other Drugs, Foods, Other allergies:

What special care is recommended for these allergies?

Year of last tetanus immunisation:

(Tetanus immunisation is normally given at five years of age (as Triple Antigen or CDT) and at fifteen years of age (as ADT))

Medical consent

As the child will be within the school grounds all medical and emergency action plans will be implemented by the school first aid officer or school nurse. Canine Comprehension will not be liable for administering medication.

Signature of parent/guardian (named above)

Date:

Note: You should receive detailed information about the program prior to your child's participation and a Parent Consent form. If you have further questions, contact the school before the program starts.