

Killarney Heights Public School

Tralee Avenue, Killarney Heights NSW 2087
T: 9451 9547, 9451 7114 E: killarneyh-p.school@det.nsw.edu.au



Dear Parents,

We are seeking permission for your child to undertake the following activities to support his/her education. We seek this permission annually, and keep it on file for future reference until an update is obtained next year. As such, this permission will be in place for the beginning of Term 1 next year should it be required. Should you wish to change your permission status on any of the items below, please contact the school office.

Please complete **each section** below and return to your child's **class teacher as soon as possible**.

Student's Name: _____ Class: _____

1. Permission to walk to venues outside of school grounds:

YES **NO** *I give permission for my child to walk with classroom teachers to local venues, including Killarney Heights High School, for educational experiences*

2. Authority to Publish:

Your child's image or first name or examples of his/her work could be published in our publicly available school communications in print or digital form. Content examples include but are not limited to photographs, text, illustrations/graphics, videos, sound recordings.

Our school communications include but are not limited to:

- school's public website & social media sites
- **school newsletter**
- annual school report
- local community newspaper / magazine
- media promotions and advertising activities
- electronic and print promotional material

The school **never** publishes your child's full name, nor their full name alongside their photo.

YES **NO** *I give permission for the school to publish content related to my child in school communications.*

Signed: _____

Parent/Guardian

Date: _____