

A.C.N. 608508292 A.B.N 11608508292 Phone: 0413 244 994

www.internationalparamediccollege.com.au

training@internationalparamediccollege.com.au

## **Under 18's Consent Form**

This form must be completed by the parent/legal guardian of students under the age of 18 years old who will participate in the training with International Paramedic College or one of our training Partners or contractors.

This form must be completed **prior to commencing training** and handed to the instructor on the day of training. Failure to submit this form will result in the student being denied access to the training.

Student's Name	:			
Student's DOB:		Student's	Age:	
Course date:		Course Location	on:	
Course Type: (i.e	e. Provide First aid):			
Parent/Guardiar	n's Name:			
Parent/Guardiar	n's Relationship to Stu	ıdent:		
Parent/Guardiar	n's Contact Number:		Alt.:	
Parent/Guardiar				
I as the legal guardian of the student detailed above, I give my full consent for him/her to participate in the course. I fully understand that First Aid/CPR or similar emergency training involves physical contact with other students and instructors. I also take full responsibility of the above students travel arrangements to and from the training course. In the event of my child being involved in an emergency, I give my full permission for the course instructor to take responsibility and act in the best interests of the above detailed student. This may include applying first aid treatment and calling emergency services in an effort to preserve life and protect from further harm. You will be informed of any adverse event immediately.				
Signed:			Date:	

All training staff and partners in training or contractors are required to hold a current working with children check.