

EXCURSION AUTHORISATION

KATH DICKSON FAMILY DAY CARE METROPOLITAN AND EAST COAST SERVICES | 1300 336 345

Educator Name		
Excursion type	Regular	
Date completed		
Regular outing (excursion): means a walk, drive or trip to and f	from a destination that the service visits regularly as part of its	
educational program, and where the circumstances relevant to	to the risk assessment are substantially the same on each outing.	
Note: If the excursion is a regular outing, the authorisation is o	only required to be obtained once in a 12 month period	
Irregular excursion date		
For regular excursions day of the week	☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday	
A separate authorisation for each day of the week is	☐ Saturday ☐ Sunday	
required		
Frequency of Excursion	☐ Weekly ☐ Fortnightly ☐ Monthly ☐ Term time only	
If this is fortnightly or monthly excursion please attach a calendar of excursion dates		
Destination and address		
Destination and address		
Proposed activities to be undertaken by the child during the		
excursion		
Estimated departure time to the destination:	Estimated arrival time:	
Estimated departure time from the destination:	Estimated arrival time:	
Means of transport		
Total number of children involved in the excursion		
Have requirements for seatbelts or child restraints been met for each child?	☐ Yes ☐ No	
The number of educators / responsible adults, appropriate		
to provide supervision, and whether any adults with		
specialised skills are required.		
Educator to child ratio		
CHILDREN ATTENDING		
CHILDS NAME CHILD RESTRAINT USED	NAME OF PARENT PARENT SIGNATUR	E
A risk assessment has been prepared and is available at the se	arvice upon reguest	