



**Toongabbie Primary School**  
**Victoria Street, Toongabbie. 3856**  
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**Email: toongabbie.ps@edumail.vic.gov.au**  
**Principal: Lisa Branch**  
**ABN: 39 418 338 632**

**Permission Form for Media Publications, Local Excursions, Head Lice.**

**MEDIA PUBLICATIONS**

I ..... give permission for  
my child ..... to have his/her  
photograph used in publications / media / school website.

Signed: ..... Date: .....  
(Parent/Guardian)

**LOCAL EXCURSIONS**

Prior notice will be given, allowing you time to decide on each individual excursion.

I ..... give permission for  
my child ..... to attend local excursions, nature  
walks, films and performing arts shows that are part of the school program. I authorise the  
teachers in charge of these excursions to consent, where it is impracticable to communicate  
with me, to the child receiving such medical or surgical treatment as may be deemed  
necessary.

Signed: ..... Date: .....  
(Parent/Guardian)

**HEAD LICE CHECK**

I ..... give permission for  
my child ..... to have his/her head checked  
for head lice by a nurse from the Latrobe City Health Department.

Signed: ..... Date: .....  
(Parent/Guardian)

**\*\* PLEASE NOTE – ONE FORM PER CHILD TO BE COMPLETED AND RETURNED TO THE  
OFFICE AS SOON AS POSSIBLE PLEASE. Thank You.**