

Under 19 Excursion Permission Form

This form is to be used by under 19 students when attending an overnight camp or excursion. It must be signed by your Guardian/Caregiver and provided to the organizer of the activity.

Activity Details

Date(s): From Tuesday, 14 July To: Thursday, 23 July 2026

Destination(s) of activity and activity description:

Monash University, Indonesia campus and the Breeze; Orientation activities that involve light physical activity, that might include walking, padel, basketball, badminton, yoga, Zumba, bowling, and other team-building games held on the aforementioned locations.

Name of Club & Society Membership: Monash Student Community

Organiser (attending activity) Name: Student Experience Operations **Contact phone while on activity:** 6221 50300 298

Email: mi-student-experience@monash.edu

Personal Details of Student

Surname:		Given Name:	
Address:			
Suburb:		Post Code:	
Phone (Home):		Work or Mobile:	
Student I.D. No:		Date of Birth:	Age:
Email:			

Medical Details

All data provided by the individual shall be kept in confidence and used only in the event of an accident or emergency.

Please list any medical conditions:

Please provide your Medical Practitioner (doctor) details:

Name: _____ Phone: _____

(Please remember to bring any medication you require, e.g. asthma pump spray)

Guardian/Caregiver Permission

I, _____ hereby declare that I have discussed this activity with my nominated guardian and I am willing to adhere to the terms and conditions listed below. I am aware that I need to notify my guardian/care-giver as soon as possible in regards to any personal, medical or behaviour issues that may arise.

Student Signature: _____ Date: _____

Guardian Signature: _____ Date: _____

Guardian/Care-giver contact In Case Of Emergency (Please provide accurate details of persons to be contacted)

Surname:		Given Name:	
Address:			
Suburb:		Post Code:	
Phone (Home):		Work or Mobile:	

Lodgement of form: Form should be submitted to the organizing club.

Terms & Conditions

1. I will behave in an acceptable manner.
2. I understand that there will be no alcohol served or consumed throughout my participation in this activity.
3. I will not undertake or participate in any activities that could be considered to be of undue risk to my personal safety.
4. I will contact my guardian immediately if any changes occur during this activity.

Privacy statement

The information on this form is collected for the purposes of assessing your accommodation and welfare arrangements. You have the right to access personal information that Monash University holds about you, subject to any exceptions in relevant legislation. If you wish to seek access to your personal information or inquire about the handling of your personal information, please contact the University Privacy Officer at the following email address: privacyofficer@adm.monash.edu.au.