

MOUTHGUARD CONSENT FORM - REGIONAL TRIAL -

The Department of Education Curriculum Activity Risk Assessment (CARA) guidelines mandate that **mouthguards are compulsory** for students wishing to participate in a school sport representative event for the sports listed below.

- Australian Football (AFL)
- Rugby League
- Rugby Union

Hockey

Water Polo

The Department of Education strongly recommends that students wear <u>custom-fitted</u> mouthguards. Parents / Carers are requested to refer to the Australian Dental Association website below in order to make an informed choice about the different types of available mouthguards.

https://www.ada.org.au/Your-Dental-Health/Teens-12-17/Mouthguards

If a student is unable to wear a mouthguard for medical reasons, then a <u>signed medical clearance</u> <u>certificate</u> is required prior to participating in the representative event.

Please complete the parent / carer consent permission section below and return this form to the relevant team official, along with all other required paperwork, **prior** to the representative event.

<u>Failure to comply</u> with this permission process will mean that the <u>student will be unable to participate</u> at the specific representative school sport event.

STUDENT DETAILS

Student's Name	
Date of Birth	
School	
	Parent / Carer Consent and Medical Declaration
•	(name of parent) understand that mouth protection is port. I have read the information provided to me about mouth protection and by for the type of mouth protection I/my child will wear whilst playing this sport.
I confirm that the al	bove mentioned student:
Please tick one of t	the boxes below
has NO identified medical condition/s that may impact on their safety by wearing a mouthguard during participation in this sport.	
OR	
	tified medical condition/s that may impact on their safety during participation in and therefore cannot wear a mouthguard. The required medical clearance attached.
Signature of Parent	t: Date: