



# Gumdale State School

An Independent Public School  
Always Our Best

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## CONSENT FORM FOR THE USE OF PERSONAL INSECT REPELLENT

From time to time, sometimes as a result of weather, there will be an increase in the number of mosquitoes, black flies and/or biting midges in this area. Queensland Health has advised that:

- personal insect repellents containing Picaridin or DEET are recommended to protect children from insect bites,
- only a thin, even coverage of repellent is required on the skin (do NOT apply an excessive amount), and
- if your child requires assistance, you should apply repellent to your hands first, then to the exposed skin of your child.

Our school encourages children to have their own personal repellent. As Queensland Health recommends that young children should not be allowed to apply their own repellents, our staff will be available to help those students who need assistance.

**For your child to use their own insect repellent at school, you are required to provide consent.**

**Queensland Health advises that anyone with known allergies to personal insect repellents should not use these products. Parents should check the manufacturer's recommendations before use. If you have any concerns regarding your child's use of insect repellents, you should consider seeking medical advice prior to giving consent.** Information on insect repellents can be found at : [http://medent.usyd.edu.au/arbovirus/mosquit/repellent\\_guidelines\\_2011.pdf](http://medent.usyd.edu.au/arbovirus/mosquit/repellent_guidelines_2011.pdf)

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### WRITTEN AUTHORITY FOR THE USE OF INSECT REPELLENT AT GUMDALE STATE SCHOOL

Please complete, sign and return at your convenience

Student name: .....Class: .....Date of birth: .....

Please complete the relevant section below regarding the use of insect repellent, as directed by the school.

- YES, I give permission for my child to apply their own personal insect repellent.
- YES, I give permission for my child to have \_\_\_\_\_ insect repellent applied.
- YES, my child has used this insect repellent recently with no adverse reactions.
- NO, I do not give permission for my child to use insect repellent.

Additional information (if applicable) \_\_\_\_\_

Parent/Carer name (Please print): .....

Parent/Carer signature: ..... Date: .....

**Should you have any enquiries regarding this consent form, and the supply and use of personal insect repellent, please contact the school front office on 3902 8333.**