



**Student Full Name**

This form gives consent for authorised person/s (eg. family and friends) residing in/visiting Cairns, to sign the student out for weekend leave, shopping or other events in Cairns.

The following people have been authorised to sign out. **Photo identification is required for sign out.**

**Authorised Person – 1**

Name			
Address			
Phone number			
Parent/Guardian Name			
Parent/Guardian Signature		Date	

**Text/email approval received by staff (in writing):**

Staff Name			
Signature		Date	

**Authorised Person – 2**

Name			
Address			
Phone number			
Parent/Guardian Name			
Parent/Guardian Signature		Date	

**Text/email approval received by staff (in writing):**

Staff Name			
Signature		Date	

**Authorised Person – 3**

Name			
Address			
Phone number			
Parent/Guardian Name			
Parent/Guardian Signature		Date	

**Text/email approval received by staff (in writing):**

Staff Name			
Signature		Date	

**Authorised Person – 4**

Name			
Address			
Phone number			
Parent/Guardian Name			
Parent/Guardian Signature		Date	

**Text/email approval received by staff (in writing):**

Staff Name			
Signature		Date	