Phone: 03 52 501841 Fax: 03 52 501459

ABN: 60 091 751 408







5/6

# Camp 2021

16th June 2021

Dear Grade 5/6 parents/guardians,

Camp is coming up soon and we can't wait. Please see below for further information, including costing, and the attached notes about permission and medical information.

VENUE: Camp Kangaroobie

ADDRESS: 1040 Old Ocean Road, Princetown, Victoria 3269, Australia.

DATE: Departing school at 9:30am sharp on Wednesday 4th August Returning to school at approximately 2:00pm Friday 6th August 2021.

Payment plans can be arranged at the office. Please see the office as soon as possible if this is required.

Coronavirus: This camp will be subject to all Government, Department of Education and School Council directions and we will keep you informed of any changes as they take place.

Please find attached a copy;

'What to bring' - please keep this for your reference

and the following documents, to be completed and returned to your child's classroom teacher by Friday the 25th June 2021

- Parent Excursion Consent Form
- Confidential Medical Information Form

Please see your child's classroom teacher if you have any questions regarding camp.

Thankyou,

Mr Jack Stevens and Mrs Clair Ractliffe

## PLEASE RETURN PERMISSION/MEDICAL NOTES BY MONDAY 19TH JULY 2021

#### Parent/Guardian Permission Camp Kangaroobie

l give permission for Kangaroobie.	r my ch	ild			to take part in 5/6 Cam <sub>l</sub>	Э
In the event of accid seek such medical or surgi possible, should such an e emergency contact on the	ical tred vent oc	atment ccur, eve	as is dee ery attem	med necessar pt will be mad		
Signed				3	Date:	
Name: Parent/Guardian (,						
Payment of \$ enclosed	ı			Paymen	t by QKR/EFTPOS/Bpay	0
CSEF funding	0		(,	please circle)		
Office use only	Poid		Dote		Sioned	

Page PAGE 1 of NUMPAGES 2

#### **Confidential Medical Information Form for Excursions**

The school will use this information if your child is involved in a medical emergency. All information is held in confidence. The medical information on this form must be current when the excursion/program is run.

Parents are responsible for all medical costs if a student is injured on a school approved excursion unless the Department of Education and Training is found liable (liability is not automatic). Parents can purchase student accident insurance cover from a commercial insurer if they wish to.

Excursion/program nar Date(s): Teacher to fill	me: Teacher to fill this	in		
Date(s). Teacher to fill	uns m			
Student's full name:				
Student's address:				
			Postco	de
			rosico	ue.
Date of birth:		Year level:		
Parent/guardian's full	name:			
Emergency telephone	numbers: After hours		Business hours	
Name of person to cor	tact in an emergency	(if different from the par	ent/guardian):	
Emergency telephone	numbers: After hours		Business hours	
Name of family doctor				
Name of family doctor	i			
Address of family doct	or:			
Phone number:				
Medicare number:				
Medicare Humber.				F
Medical/hospital insura	ance fund:		Member number:	
Ambulance subscriber	? □ Yes □ No If yes,	ambulance number:		
Is this the first time your child has been away from home? □ Yes □ No				
15 this the hist time your time has been away from home: 12 feet a No				
Please tick if your child is living with any of the following health conditions:				
□ Asthma (if ticked complete Asthma Management Plan)				
☐ Anaphylaxis (if ticked review and update the Individual Management Plan for the camp or excursion)				
□ Bed wetting	□ Blackouts	□ Diabetes	□ Dizzy spells	□ Migraine
☐ Heart condition	□ Sleepwalking	☐ Travel sickness	☐ Seizure of any type	_
- Heart Condition	a Sieepwalking	I Havel Sickliess	a seizure or arry type	
□ Other:				



Swimming ability  Please tick the distance your child can swim comfortably.  Beginner swimmer — little or no experience including in shallow water.	NUMPAGES 2
☐ Intermediate swimmer basic skills, able to swim 25 metres with a recognisable st	roke.
☐ Advanced swimmer — able to swim 50 to 100 metres using two	
recognisable strokes and to demonstrate one survival stroke in deep water.	
Allergies Please tick if your child is allergic to any of the following:	
□ Penicillin □ Other Drugs:	
□ Foods:	
□ Other allergies:	
What special care is recommended for these allergies?	
Year of last tetanus immunisation: (Tetanus immunisation is normally given at five years of age (as Triple Antigen or CDT) and at fifteen years or	f age (as ADT))
<b>Medication</b> Is your child taking any medicine(s)? $\square$ Yes $\square$ No If yes, provide the name of medication, dose and describe when and how it is to be taken.	
All medication must be given to the teacher-in-charge. All containers must be labelled with name, the dose to be taken as well as when and how it should be taken. The medications v staff and distributed as required. Inform the teacher-in-charge if it is necessary or appropri to carry their medication (for example, asthma puffers or insulin for diabetes). A child can medication with the knowledge and approval of both the teacher-in-charge and yourself.	vill be kept by the late for your child
<b>Medical consent</b> Where the teacher-in-charge of the excursion is unable to contact me, or it is otherwise im contact me, I authorise the teacher-in-charge to:	practicable to
<ul> <li>Consent to my child receiving any medical or surgical attention deemed necessary by a m practitioner.</li> <li>Administer such first-aid as the teacher-in-charge judges to be reasonably necessary.</li> </ul>	edical
Signature of parent/guardian (named above)	
Date:	

The Department of Education and Training requires this consent to be signed for all students who attend government school non-local excursions.

**Note**: You should receive detailed information about the excursion/program prior to your child's participation and a Parent Consent form. If you have further questions, contact the school before the program starts.















SCHOOL CAMP ON THE GREAT OCEAN ROAD ... BEAUTIFUL BEACH, FARM & BUSHLAND

### WHAT TO BRING

We spend a lot of time in the great outdoors at Kangaroobie and encourage you to bring appropriate walking shoes and clothing that will keep you warm in the cooler months, cool in the summer months, and dry all year round.

However, the weather can be changeable on the southern coast of Australia – so please be sure to bring everything listed on the Kangaroobie checklist – no matter what the weather bureau is forecasting!









Waterproof raincoat	Shoes* (boots/sneakers/gumboots - at least 3 pairs as one will get wet)	Socks & underpants (5 pairs)
Pyjamas	Tracksuit pants (2 pairs)	Jeans/long pants (L pair)
Shorts (2 pairs)	Warm jumpers (x 2)	Hat or cap
T-shirts (x 5)		Sleeping bag & sheet
Pillow & pillowcase	Towels (x 2)	Tolletries (soap, toothbrush, toothpaste, roll-on deodorant, shampeo)
Insect repellant (roll-on or pump, not aerosol)	Sunscreen	Torch
A plastic bag (to put wet/muddy	Hand sanitiser	