Year Five Camp 2016

28 January 2016

Dear Parents

The Year 5 Camp will be held from **Wednesday 10 to Friday 12 February** at the Outdoor Education Experience (OEE) site at **Morisset**.

The cost of the camp covers all meals, accommodation, camp program, trained instructors and transport to and from the venue in a seat-belted bus.

Attached are permission forms and information notes:

- CNPS Excursion Code of Behaviour
- OEE Medical, Activity Restriction and Consent Form.
- Activity List
- CNPS Permission for Activities Form
- Student Gear Checklist

Please read and complete all forms and return them in one package to your child’s class teacher **no later than Wednesday 3 February** so that final arrangements can be made with the camp.

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Ann Coleby
Year 5 Teacher

Sharon Tollis
Principal

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Year Five Camp 2016

I consent to my child ____________________________ of class _______ participating in the Year 5 Camp which will be held from **10 to 12 February 2016 at Morisset**.

I understand that travel to and from the camp will be by private seat-belted bus.

In the event of illness or injury, I authorise the seeking of such medical assistance on my behalf that my child may require.

Child’s Name: ____________________________ Class: ________

Signed ____________________________ Parent/Guardian Date _______________
The Year 5 camp will be held at Morisset Centre Outdoor Education Experience from **Wednesday 10 to Friday 12 February 2016**.

A certain standard of behaviour will be required of your child for this excursion to be a successful and enjoyable time for all. On arrival at camp staff will outline camp guidelines and rules and students will be expected to carry out those safety rules and all instructions given by instructors during the program.

All children will be expected to behave in a responsible manner in accordance with our school policy of Safety, Learning, Respect, with which all children are familiar. Children will be expected to observe the following general rules:

- follow directions
- keep hands, feet and other objects to yourself
- sit to eat
- play safely
- be in the right place at the right time
- use appropriate language – no swearing, no arguing or challenging teacher’s directions

We feel that these rules are equally applicable on the excursion as at school.

We have spoken to the children about several aspects relating to the excursion, including behaviour. Attached is a code of behaviour agreement to be signed by parents and students. We would appreciate your support in reinforcing understanding of the need for responsible behaviour and ask you to sign and return the form.

Unfortunately, any child who cannot follow the code of behaviour and safety rules will be removed from activities immediately. If the situation is serious enough you will be contacted and may be required to collect your child from the camp. In this case it must be understood that fees are non-refundable.

We thank you for your support in this matter and hope your child will enjoy the excursion and have many positive experiences and memories.

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**EXCURSION CODE OF BEHAVIOUR**

I understand that appropriate behaviour is expected for the Year 5 camp and have discussed this with my child. He/she understands the consequences for misbehaviour.

Child’s Name: ___________________________________________     Class: ____________

Signed ______________________________________ Parent/Guardian     Date: ___________

I understand that appropriate behaviour is expected for the Year 5 camp and understand the consequences for misbehaviour.

Student Signature: _________________________________________
Please complete the Medical and Activity Restriction Form and return to the school office or the teacher/s responsible for organising the camp at your son/daughter’s school.

**Participant Details**

Surname: .................................................. Gender: □ M / □ F

Given Name/s: .............................................. Date of Birth: .... / .... / ....

Address: ................................................................

........................................................................

**Emergency Contact Details**

□Parent / □Guardian / □Contact Person: ............................................................... (Name in Full)

Telephone: ........................................................... (Home) ...................................... (Business) .................................... (Mobile)

**Medical Information**

Medicare No: ................................................. Ambulance Cover: □ Yes / □ No

Position on Medicare Card (eg. 1,2): .................. Medicare Expiry: ...........................................

Private Health Insurance Fund: □ Yes / □ No

Fund Name: .................................................... Fund Policy No: ..................................................

**Please answer the following medical questions regarding your son/daughter:**

1. Is your son/daughter in good health? □ Yes / □ No

2. Does your son/daughter suffer any chronic illness, or disability? □ Yes / □ No

   If yes, please specify: ..........................................................................................

   .........................................................................................................................

3. Does your son/daughter need to take any form of medication on camp? □ Yes / □ No

   If yes, please specify: (dose, frequency etc.) ..........................................................

   .........................................................................................................................

   Does the medication need refrigeration? □ Yes / □ No

4. Has your son/daughter suffered from any acute illness during the past four months? □ Yes / □ No

   If yes, please specify: ..........................................................................................

   .........................................................................................................................

5. Has your son/daughter had any major surgery (knee, back, heart, etc.)? □ Yes / □ No

   If yes, please specify: ..........................................................................................

6. Has your son/daughter been treated by a doctor during the last four weeks? □ Yes / □ No

   If yes, please attach a doctor’s report with instruction about medical treatment and a certificate stating that the participant is fit to attend.
7. Does your son/daughter have any allergies? (insects, food, medication, etc.) □ Yes / □ No
   If yes, please specify: ........................................................................................................
   ........................................................................................................................................

8. Does your son/daughter have any special dietary requirements? □ Yes / □ No
   If yes, please specify: ........................................................................................................
   ........................................................................................................................................

9. Does your son/daughter: wet the bed? □ Yes / □ No
   sleep walk? □ Yes / □ No

10. Has your son/daughter had the Diphtheria Tetanus Toxoid booster injection? □ Yes / □ No
    If yes, what date was the last booster given? ...... / ...... / .......

11. Do you give permission for Panadol to be administered to your son/daughter if required? □ Yes / □ No

Activity Restrictions

All activities are instructed by qualified instructors and at all times are supervised and accompanied by your
son/daughter’s school teachers.

During your son/daughter’s time at camp the original program which is organised in consultation with the schools
requests may need to be changed due to weather or other unforeseen events. We recommend you view the entire
activity list available at the centre your child is attending. This can be done by going
to www.outdoorednsw.com.au and clicking on Morisset. Once inside the sites page you can click on “Activity
List” to receive a download of the sites entire activity list.

If you do not want your son/daughter to participate in any particular activity or activities, please write them in the
space provided and notify your son/daughter of the activity or activities for which they are to be excluded. Please
be aware that any activities that have been restricted cannot be changed by the student on arrival should they then
wish to participate. All activities are “Challenge by Choice” and no student is forced to attempt any activity:
........................................................................................................................................

Is your son/daughter permitted to participate in swimming/water activities? □ Yes / □ No

If no, please inform your son/daughter that they are not to participate in any swimming/water activities.

How do you rate your son/daughter swimming ability?
□ Non Swimmer    □ Average    □ Competent (swim more than 50m)

Parent or Guardian Consent

In the event of any accident or illness and I am unable to be contacted, I authorise the obtaining of such medical
assistance on my behalf that my son/daughter may require. I also agree to cover medical fees and/or cost of such
assistance that may be incurred while my son/daughter is with Outdoor Education NSW.

Wilful damage of property while with Outdoor Education NSW will be paid for either by the student involved or
by their parent/s or guardian.

........................................................................................................ to attend the program run by Outdoor Education.
(Son/Daughter’s Full Name)

Signature of Parent/Guardian .................................................... Date: ..... / ..... / .......
<table>
<thead>
<tr>
<th>Activity</th>
<th>Description</th>
<th>Age</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Abseiling</strong></td>
<td>5m and 10m abseil tower at the centre</td>
<td>Age dependent.</td>
</tr>
<tr>
<td></td>
<td>Generally Yr. 5+</td>
<td></td>
</tr>
<tr>
<td><strong>Archery</strong></td>
<td>Safe and fun. Structured lesson and practice time</td>
<td>All ages</td>
</tr>
<tr>
<td><strong>Bushcraft</strong></td>
<td>Basic camp fire building and damper cooking</td>
<td>Generally Yr. 1+</td>
</tr>
<tr>
<td><strong>Canoeing</strong></td>
<td>3 person canoes. All students wear PFD’s (life jackets provided by OEE). Creek or lake locations</td>
<td>All ages</td>
</tr>
<tr>
<td><strong>Dual Flying Fox</strong></td>
<td>Harnessed Activity. Adrenaline rush flying fox down a steep slope.</td>
<td>Generally Yr 5+</td>
</tr>
<tr>
<td></td>
<td>Min. Yr. 3</td>
<td></td>
</tr>
<tr>
<td><strong>Fencing</strong></td>
<td>Great fun and very safe. Protective equipment used to suit all ages. Structured lesson and practice time</td>
<td>All ages</td>
</tr>
<tr>
<td><strong>Giant Swing</strong></td>
<td>Very exhilarating 15m harnessed pendulum swing</td>
<td>Generally Yr. 5+</td>
</tr>
<tr>
<td></td>
<td>Min. Yr. 3</td>
<td></td>
</tr>
<tr>
<td><strong>High Ropes Courses</strong></td>
<td>Harnessed activity. Sequential elements at 4m and 7m</td>
<td>Generally Yr. 3+, 5+, 7+, 9+</td>
</tr>
<tr>
<td><strong>Icebreakers</strong></td>
<td>Introductory Get To Know You and trust building activities</td>
<td>All ages</td>
</tr>
<tr>
<td><strong>Initiatives Exercises</strong></td>
<td>Student led problem solving and initiative activities</td>
<td>All ages</td>
</tr>
<tr>
<td><strong>Moonwalker</strong></td>
<td>Unique teamwork activity focusing on production of a quality product</td>
<td>Generally Yr. 7+</td>
</tr>
<tr>
<td><strong>Mud World</strong></td>
<td>Challenging mud course for teamwork and a lot of fun.</td>
<td>Generally Yr. 7+</td>
</tr>
<tr>
<td><strong>Multi Climb</strong></td>
<td>Harnessed pole, rope, peg and crate climbing activities. 12m.</td>
<td>All ages</td>
</tr>
<tr>
<td><strong>Orienteering</strong></td>
<td>Introduction to navigation. Score course or point to point courses at the centre</td>
<td>All Ages</td>
</tr>
<tr>
<td><strong>Pioneering</strong></td>
<td>Teamwork Initiative Activity</td>
<td>All ages</td>
</tr>
<tr>
<td><strong>Raft Building</strong></td>
<td>Small group teamwork activity. Construct and race your raft</td>
<td>Generally Yr. 5+</td>
</tr>
<tr>
<td><strong>Sports</strong></td>
<td>Oval games, basketball, volleyball, table tennis</td>
<td>All ages</td>
</tr>
<tr>
<td><strong>Super Drop</strong></td>
<td>8m harnessed vertical drop.</td>
<td>Generally Yr. 5+</td>
</tr>
<tr>
<td><strong>Teamwork Matrix</strong></td>
<td>Low ropes activity to promote small group teamwork</td>
<td>Min. Yr. 3</td>
</tr>
<tr>
<td><strong>Night Activities</strong></td>
<td>Games Night, Trivia Quiz, Camp fire, Challenge Night, Disco, Priest of the Parish, County Fair</td>
<td>All ages</td>
</tr>
</tbody>
</table>
Dear Parents

Students attending camp will be placed into groups which rotate around seven or eight activities over three days. The activity groups are also used for the Duty Roster for set up and clean up duties at meal times. Night time activities have been organised and students will combine for those activities.

An Activity List has been included in this package. All children participate in the same activities. Extra activities are included in the list as some activities may not be available due to weather conditions.

Fully trained OEE instructors run all activities and provide relevant safety/protective equipment and procedural instruction prior to each activity. Teachers from our school accompany the groups to each activity in a supervisory role. These teachers have current accreditation in CPR and Emergency First Aid.

The camp has a policy of “challenge by choice”, that is, everyone is encouraged to give it their best, but no-one is forced to do any activity. Students try activities at any level of challenge they wish, as they feel comfortable. Experience has shown us that the instructors are very supportive and patient. Students often surprise themselves with what they can achieve with help. When they overcome their hesitation to attempt an activity they feel a great sense of pride. We have found that generally the best policy is for parents to allow their child to make the decision at camp. Students will not be permitted to participate in any activity for which parental permission has been withdrawn.

Please read the Activity List included in this package. If you do not want your son / daughter to participate in any particular activity or activities, please list those activities in the space provided below. Please notify your son / daughter of the activity or activities for which they are to be excluded.

Child’s name ..........................................................................................................................................

Activities from which my child is to be excluded:

................................................................................................................................................................
................................................................................................................................................................
................................................................................................................................................................
................................................................................................................................................................
CARINGBAH NORTH PUBLIC SCHOOL
YEAR FIVE CAMP 2016 - PERMISSION FOR ACTIVITIES

I give / do not give permission for my child to participate in the water or swimming activities.

Child’s name: …………………………………………………………………………………………….

Signed ……………………………………………………….. Date ………………………….

If you have given permission for your child to participate in the water activities, please complete the following form to describe your child’s swimming ability.

In relation to the proposed water or swimming activities, I advise that my child is a:

(please circle one)

- non-swimmer
- poor swimmer
- average swimmer
- strong swimmer

I advise that my child requires the following flotation device to assist him/her in the water:

………………………………………………………………………………………………………………

I have completed the Permission for Activities form and the Swimming Response form and informed my child of the activities from which they are to be excluded.

Signed: ………………………………………………………………….. Date: …………………
**STUDENT GEAR CHECKLIST**

<table>
<thead>
<tr>
<th>Left Column</th>
<th>Right Column</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Small day pack</td>
<td>□ Water bottle</td>
</tr>
<tr>
<td>□ 4 T-shirts (No mid-riff /sleeveless shirts/ singlets)</td>
<td>□ Insect repellent and sunscreen</td>
</tr>
<tr>
<td>□ 3 pairs of shorts</td>
<td>□ 2 pairs of sensible joggers or boots (1 old pair that you can get wet – no thongs!)</td>
</tr>
<tr>
<td>□ 2 long sleeve shirts or jumpers</td>
<td>□ Plastic bags for wet or dirty clothes</td>
</tr>
<tr>
<td>□ 2 pair of long pants for cold weather</td>
<td>□ Toiletries – soap, toothpaste, toothbrush, hairbrush, hair ties, deodorant</td>
</tr>
<tr>
<td>□ Spare socks and underwear</td>
<td>□ 2 towels (1 for outdoors / 1 for showers)</td>
</tr>
<tr>
<td>□ Hat or cap</td>
<td>□ Swimmers (for canoeing)</td>
</tr>
<tr>
<td>□ Raincoat or plastic poncho</td>
<td>□ Very old clothes for Mud World</td>
</tr>
<tr>
<td>□ Pyjamas</td>
<td>□ Mess kit – 1 plate, 1 bowl, 1 fork, 1 knife, 1 spoon, 1 cup and tea towel</td>
</tr>
<tr>
<td>□ 1 pillow and pillow case</td>
<td>□ Optional – Camera</td>
</tr>
<tr>
<td>□ Sleeping bag or sheet/s with blanket</td>
<td></td>
</tr>
</tbody>
</table>