Grade 3 WEEKAWAY Camp
November 5th – November 6th 2012

23/7/12

Dear Parents and Carers,
Please find detailed information regarding the Grade 3 Camp to be held at Weekaway. The information below is a guide for you to follow to assist in preparing for the camp.

Camp Name and Location: Weekaway, 186 Kitchenhams Rd BENLOCH Victoria

Dates: Monday November 5th – Tuesday November 6th

Cost: $150.00

Significant Dates:

July 23rd 2012 (Monday) - Camp Participation Consent Forms A, B and C, Deposit Request, Confidential Medical Report for School Camp (Form D), Itinerary & Clothing List sent home.

September 7th 2012 (Friday) – Camp Information, Camp Participation Consent Forms A, B & C, Medical Form D, and the deposit of $70.00 to be returned to the school office. Medication Plans including Asthma and Anaphylaxis Plans should be updated by your doctor. Failure to provide an up-to-date plan may preclude the student from attending camp.

October 12th (Friday) - Final Payment due - (No exceptions unless prior arrangement has been made with Trudi Jacobson. Please contact Trudi as early as possible if paying for the camp may be a problem. A long term payment plan can be developed or you may even be eligible to access funds through other organisations. Trudi can assist with this.)

November 5th (Monday) – Depart for camp at 9:00am - Arrive at school between 8:15am and 8:30am outside the BER Building with luggage, hat, snack, drink & lunch in disposable named packaging.

November 6th - Students return to school at 2:30pm. They must be collected by an adult and marked off the roll.
**CONFIRMED STAFF ATTENDING THE CAMP**

Jeremy Hibbs, Corrina Hartland, Erin Jackson and Carolyn Briggs. (Others to be finalised)

**ADVENTURE ACTIVITIES AT CAMP MAY INCLUDE:**

**Yabbying/Ponding** - In this activity the students learn about ecosystems and how important they are.

**Canoeing** - This activity develops canoeing skills as well as focuses on cooperation and communication skills. Canoeing also creates an awareness and understanding of the local environment.

**Rogaining** – The students work in groups moving around the local campsite finding letters and numbers. Students learn skills in mapping, recording and being able to solve problems in group situations.

**Archery** – Students learn the skills of archery by being instructed in a designated safe environment while achieving personal goals of attempting to hit stationary targets.

**Ropes Course** - The students are taught techniques of balance in a low ropes course situation and being placed in the role of spotter to ensure the safety of fellow group members. Children challenge themselves and to complete set tasks.

**Glow Trail** – In the evening the students use their torches whilst negotiating the nature trail. This activity develops fitness, orienteering skills, team work skills and self reliance.

**Camp Fire** – In the evening the students sit around the camp fire pit for storytelling and word challenges. This activity builds a sense of community and is challenging

All activities are supervised by appropriately trained staff. They are designed to be fun and challenging whilst developing specific skills. The school values are reinforced and reflected on, during the camp.

**You may choose to pay for the total cost of the camp now or later, or you may prefer to pay smaller, regular amounts commencing immediately so that the camp is paid before the October 12th deadline.** A variety of options are available including using ‘credit’ on your school account, BPay, Eftpos, by cheque or in cash.

Failure to meet the above timeline dates may mean that your child forfeits their place at camp. Please note that it is not possible to provide a refund if it is decided after October 12, that your child will not attend camp, as your money will have been forwarded to the appropriate organisations.

Jeremy Hibbs
Camp Coordinator
Grade 3 Weekway Camp 2012

MINIMUM CLOTHING AND EQUIPMENT LIST FOR GRADE 3 WEEKAWAY CAMP

2 pairs of jeans / tracksuit pants
2 pairs of shorts
3 pairs of socks
3 changes of underwear
3 t-shirts / tops
1 pair pyjamas
2 jumpers or warm tops
Parka or raincoat or warm jacket
Warm hat / beanie / cap
1 pair comfortable walking shoes
Spare pair (old pair) of shoes for canoeing
1 towel
Garbage bag (for dirty clothing)
Torch
Sleeping bag (blankets supplied)
Pillow & Pillow case

Toiletries
Soap
Toothbrush and toothpaste
Comb / brush
Shampoo
Sunscreen (Please ensure your child knows how and when to apply.)

Optional
Camera
Book
Board game (indoor)
Own bike helmet + gear

Valuables will be the child’s own responsibility

Please do not bring any of the following:
Money
Food including lollies or other snacks
Any electronic items/games

Please make sure that all belongings are clearly named with the family name.
WEEKAWAY

Program for Year 3

Proposed Itinerary

Monday  November 5th 2012

8:15  am     Arrive at school. Assemble outside the BER Building
(n.b. The Grade 4 Camp is departing at the same time and will be assembling outside the MPR.)

9:00  am     Buses leave school

10:30 am     Arrive at camp

10:30 pm     Settle in, unpack, tour of camp

12.30 pm     Lunch (To be provided by you in a disposable and named package)

1:30pm – 2:30pm Activity Round 1

2:30pm – 3:30pm Activity Round 2

3:30 pm     Afternoon Tea

4:00pm – 5:00pm Activity Round 3

6:00  pm     Dinner

Tuesday  November 6th 2012

8:00  am     Breakfast

9.00  am     Pack up. Clean up. Bags out the front

10:00 am – 11:00 am Activity Round 4

11:00 am – 12:00 pm Activity Round 5

12:30 pm     Picnic Lunch & Emu Parade

1:00  pm     Bus departs camp

2.30   pm     Bus arrives back at Kennington Primary School
Children to be collected by an adult and marked off the class roll

(When dropping off and collecting children, please do not park in the bus zone. When collecting your child please have their name marked off the roll.)
Grade 3 Weekaway Camp  November 5th - November 6th 2012
Department of Education and Early Childhood Development - Parent Camp Consent Form

Name of school:
Kennington Primary School
Phone: (03) 5443 2011       Fax: (03) 5441 7321
Email: kennington.ps@edumail.vic.gov.au
Website: www.kenningtonps.vic.edu.au

Title of Camp:
GRADE 3 WEEKAWAY CAMP
186 Kitchenhams Rd BENLOCH Vic.3435

Educational purpose of the program:
The camp is a part of the school's Outdoor Education & Physical Education Program and is designed to meet the following purposes:
- Development of organisational skills
- Development of cooperative living skills
- Meeting of appropriate personal and physical challenges
- Use of initiative and problem solving skills
- Further developing an appreciation the natural environment

Details of supervising staff:
All camp activities are conducted by qualified instructors from the camp.
Kennington Staff: Jeremy Hibbs, Corrina Hartland, Erin Jackson, Carolyn Briggs.

Cost:
$150.00 per child

Payment Schedule:
Deposit $70.00 due Friday 7th September
Final Payment due Friday 12th October

Payment Options:
Smaller payments may be made prior to the due date.
Final payment must be received by Friday 12th October. (See Page 1 for payment options.)

Name and contact details of the 24-hour school emergency contact:
(camp) 03 54291503   or 03 54291708 (During Meal Times)

Departure details
Buses will depart from Kennington Primary School for Weekaway Camp at 9.00am on the morning of Monday the 5th of November.

Return details
Buses will return to Kennington Primary School at 2.30pm on Tuesday the 6th November.
All students must be collected by an adult and marked off the class roll.

Distance from expert medical care:
Distance from Hospital: 30 km
Distance from ambulance:15 km
Distance from doctor: 15 km
Accommodation arrangements:
Type of accommodation: Dormitory style accommodation.
Rooms have four to six bunk beds per room.

Travel arrangements:
Transportation provided by: Organs Coaches Kyneton. All buses used by Kennington PS are fitted with seatbelts.

Adventure activities to be undertaken or that may be offered to students throughout the program:
Yabbying/Ponding – Canoeing - Rogaining - Ropes Course – Archery - Glow Trail

Activities within this program present the potential for students to sustain physical injury. The following procedures will be implemented – along with other strategies – to manage the potential risks in the program. All activities which present the potential for students to sustain physical injury e.g. archery, ropes course and canoeing will be conducted by trained personnel. Appropriate staff ratios will be maintained. Appropriate safety equipment will be utilized. A risk management plan will be implemented.

A risk management plan for this program has been developed by staff and is available for parents to review on request.

Attachments
- Daily itinerary
- Group equipment list (if relevant)
- Clothing list
- Medical form
- Further location descriptions (if applicable)
Kennington Primary School
Grade 3 Weekaway Camp 2012
Monday 5th November – Tuesday 6th November
Department of Education and Early Childhood Development

Parent Camp Consent
(Please return Part A, Part B, Part C, the deposit of $70.00 and Medical Form D by Friday September 7th, or Part A only, if your child is not participating.)

Parent consent
I have read all of the attached information provided by the school in relation to the Grade 3 WEEKAWAY CAMP.

☐ I give permission for my daughter/son______________________________ (full name) to attend the Weekaway Camp from Monday 5th November – Tuesday 6th November.

Parent/guardian:_________________________________________(full name)
_________________________________________(signature)___________(date)

In case of emergency I can be contacted on:
_________________________________________ OR:
_________________________________________

☐ I have attached $70.00 to this note
☐ I have attached $_________ to this note
☐ I am in credit at the school office. (This will be verified by the school office.) Please deduct $________.

This note and appropriate payment must be forwarded to the school office by Friday 7th September to allow for bookings to be confirmed. Late notes and payment will not be accepted after this date unless prior arrangements with Trudi Jacobson have been made.

OR

☐ I have read all of the attached information provided by the school in relation to the Grade 3 Weekaway Camp.

☐ I do not give permission for my daughter/son______________________________ (full name) to attend the Grade 3 Weekaway Camp.

Parent/guardian:_________________________________________(full name)
_________________________________________(signature)___________(date)
Kennington Primary School
Grade 3 Weekaway Camp 2012

Consider the following carefully before signing.

Student behaviour
‘I understand that in the event of my son’s/daughter’s misbehaviour or behaviour that poses a danger to himself/herself or others during the camp, he/she may be sent home. I further understand that in such circumstances it will be my responsibility or an adult designated by me to collect my child from the camp.

Photograph/Digital images consent
‘I consent to my child being photographed and/or visual images of my child being taken during activities for use in the school’s publications, school’s website or for publicity purposes without acknowledgment and without being entitled to any remuneration or compensation.’ [Strike out if you do not consent]

Consent for emergency transportation
‘In the event of an emergency I consent to my child being transported in a privately owned vehicle driven by a member of the supervisory staff listed above.’ An ambulance will be called in an emergency.

Student accident insurance
The Department of Education does not provide student accident cover. Parents may wish to obtain student accident insurance cover from a commercial insurer, depending on their health insurance arrangements and any other personal considerations.

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Child’s Name (please print)  Child’s Grade  Child’s Teacher’s Name

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Parent’s Name (please print)  Parent’s Signature

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CAMP PHOTOGRAPHY PERMISSION
(Note this is for camp use and does not apply to staff members taking photographs)

CAMP NON PHOTO PERMISSION

☐ I do NOT give permission for Weekaway Camp Staff to photograph and/or film my child/ren whilst at camp. (These pictures or films may be used by Weekaway Camp for marketing purposes including advertising, websites, brochures or other publications.)

OR

☐ I do GIVE permission for Weekaway Camp Staff to photograph and/or film my child/ren whilst at camp. (These pictures or films may be used by Weekaway Camp for marketing purposes including advertising, websites, brochures or other publications.)

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Child’s Name (please print)  Child’s Grade  Child’s Teacher’s Name

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Parent’s Name (please print)  Parent’s Signature  Date
Confidential Medical Report for School Camps

Child’s Name ……………………………………………………………………………………………………………

Date of Birth ........................................... School Year ...........

Parent/Guardian’s Full Name ………………………………………………………………………………………

Address …………………………………………………………………………………………………………………

Emergency Telephone: After Hours .............. Mobile .................. Business ................

Medicare No. ………………………………………..

Medical/Hospital Insurance Fund …………………………

Contribution No. …………………

Are you a member of the Victorian Ambulance Service
☐ YES  ☐ NO

Please tick if your child suffers any of the following:
☐ Bed wetting  ☐ Fits of any type  ☐ Heart condition
☐ Dizzy spells  ☐ Sleepwalking  ☐ Asthma
☐ Blackouts  ☐ Migraine  ☐ Travel sickness  ☐ Other

Please provide more information to Camp Organiser if you have ticked any of the above

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A current, signed, Asthma Plan must be provided if relevant to your child.

A current, signed, Anaphylaxis Plan must be provided if relevant to your child.

Tetanus Immunisation: Last tetanus immunisation was .......... If over ten years since immunisation, please tick
if booster is to be arranged by parents before the camp. ☐ Booster date .................

Tablets and Medicines
1. Is your child presently taking tablets and/or medicine? ☐ YES  ☐ NO
   If yes, please state name of medication, dosage etc

2. All medicines must be handed to the teacher in charge prior to leaving, with the child’s name and dose to be taken and
   when it should be taken. (These will be kept in the First Aid Centre and administered as required.)
   Please do not allow children to be in possession of any medicines while on the camp or excursion.

Previous Experience
Is this the first time your child has been away from home? ☐ YES  ☐ NO

Consent to Medical Attention
I authorise the teacher in charge of the camp to consent, where it is impracticable to communicate with me, to my child
receiving such medical or surgical treatment as may be deemed necessary.

Parent Signature ................................................................. Date ..............................................

Parent Name .................................................................