



Monday 29th August 2022

YEAR 4 GREAT AUSSIE BUSH CAMP ADDITIONAL INFORMATION

Dear Parents and Caregivers

Thank you for your prompt return of the camp permission note and non-refundable deposit. **A reminder that the final payment is due Friday 9th September for students to be able to attend.** Please find below additional information regarding this exciting overnight excursion. A gear checklist has been attached to this note for information on what students are expected to bring to the excursion

Please find additional forms attached that need to be carefully completed and returned to the class teacher by Monday 5th September. All of these forms **MUST** be completed in order for students to attend camp.

- COVID Safety Measures and Parent Consent Form
- Medical Forms
- Souvenir Shop Form

There has been a change of departure times. On Wednesday 14th September the students will need to **meet the teachers in the COLA promptly at 9 am.** This will allow time for medication collection the roll to be marked before the students depart at 9:20am.

Students will return to school before the end of the school day on Thursday September 15th. Normal dismissal procedures will occur at 2:55pm.

If your child is unable to attend this excursion due to illness, etc, please contact the school on 4340 1885 (this phone has an answering machine service) to avoid delaying the bus departure time.

If you have any questions, please do not hesitate to contact the school or speak with your child's teacher.

Tammy Buckton
Organising Teacher

Toni Skinner
Principal

In line with the 'School Positive Behaviour for Learning Program (PBL)' any child whose behaviour is deemed unsatisfactory will be withdrawn from this planned activity. This decision will be made by the Senior Executive after referral from the organising/class teacher. The parents and child will be informed if attendance is refused

Gear Checklist – Children

PLEASE CLEARLY LABEL WITH NAME ALL ITEMS

MEDICATION NEEDS TO BE GIVEN TO THE ORGANISING TEACHER

It is a good idea for students to pack their own bags so that they can re pack for the trip home.

- Water bottle
- Cup (used for morning/afternoon tea and supper)
- Raincoat (regardless of forecast)
- Hat or cap
- Sleeping bag (extra blanket in winter)
- Pillow
- Sunscreen & Hand Sanitiser
- 1 pair pyjamas (tracksuit in winter)
- Day pack (small backpack for water, sunscreen, etc)
- Torch (make sure it works before you leave home)
- Toiletries (including toothbrush!)
- Insect repellent
- 2 pairs of runners (1 old pair for water activities).
- Thongs - only for going to and from showers.
- 3 T-shirts needed, no singlet / tank tops / midriff tops (for safety on activities)
- 3 sets of underwear
- 2 pairs of shorts - NO MINI SHORTS (for safety on activities)
- 2 pairs of track pants
- 2 sloppy joes / windcheaters
- 3 pair socks
- Bath towel
- Beach Towel & swimmers
- Tissues / hankies
- Plastic bags for wet clothes / towel
- Optional - camera, money for souvenirs.



Medical Form - Child

Name of School: _____ School year: _____

Student Details:

Surname: _____ Given Names: _____

Address: _____

Postcode: _____ Date of Birth: ____ / ____ / ____ Male Female

Parent / Guardian Details:

Please Tick ✓: Mother / Guardian Father / Guardian Other Contact

Full name of Parent / Guardian: _____ Home

Phone: _____ Work Phone: _____ Mobile Phone: _____ Medicare

Number: _____ Expiry Date: ____ / ____ / ____

Student Name on Card: _____ Patient

Number on card: _____

Ambulance Cover: Yes No

Private Health Fund Name: _____ Health Fund member number: _____

Is your child in good health? Yes No

Does your child require regular medication? Yes No

Does your child suffer from any Chronic Illness / Injury / Allergies?
If yes, please specify? Yes No

Parent / Guardian Signature _____ Date: ____ / ____ / ____

Current Medication / Dietary Requirements

School: _____ Student Name: _____

Time and Dosage - Please specify exact time of medication

Medication Name	Breakfast		Lunch		Dinner		Other	
	Time	Dose	Time	Dose	Time	Dose	Time	Dose

Regulations require that all medication must be provided in the original container / packaging
Teachers will collect & administer all medication.

Has your child suffered from any Acute Illness in the past four months? If yes, details.	Yes	No
Has your child been treated by a doctor in the past four weeks? If yes, please attach a medical certificate outlining treatment, and stating that the child is fit to attend camp.	Yes	No
Has your child had any major surgery? If yes, please specify.	Yes	No
Is your child's Immunisation up to date, including tetanus? If yes, what year was the last booster given?	Yes	No
Does your child wet the bed?	Yes	No
Does your child sleep walk?	Yes	No
Do you give permission for Panadol to be administered if required?	Yes	No
Does your Child have any Dietary Requirements? If YES please specify:	Yes	No

Water or Swimming Activities:

In relation to any proposed water or swimming activities, my child: Name: _____

(Please tick ✓ one:)

STRONG SWIMMER AVERAGE SWIMMER POOR SWIMMER NON-SWIMMER



K I N C U M B E R



2022 Year 4 Camp COVID Safety Measures and Parent Consent Form

Please read and tick each section below to acknowledge you have read, understood and agree to the requirements of the Department of Education regarding COVID safety measures and your child's attendance at the Year 4 Great Aussie Bush Camp.

- I acknowledge that this event is required to be held in accordance with any current NSW Health COVID-19 Public Health Orders and the NSW Department of Education's policies and procedures.
- I acknowledge and accept that there is a risk that my child may be exposed to COVID-19 whilst attending and participating at this event.
- I confirm that my child will not attend if displaying any symptoms of illness, and/or if directed to isolate under public health orders.
- I understand that my child will need to complete a Rapid Antigen Test (RAT) prior to leaving home, on the morning before departure, and not attend the camp if the test result is positive. (A test kit will be provided by the school specifically for this to take place)
- I understand that I will be required to collect my child from the accommodation venue immediately if they become ill and present with COVID-like symptoms.

Should a student test positive, all students in the same room / cabin will be considered higher-risk contacts (household contacts).

- I understand that I may be required to collect my child from the accommodation venue immediately if they are deemed a higher-risk (household) contact and will need to follow the NSW Health Guidelines. <https://www.nsw.gov.au/covid-19/management/people-exposed-to-covid>.
- I acknowledge that the venue being visited will have their own COVID-19 safe protocols.

Parent / Guardian Signature _____ Date: ___/___/___





Souvenir Shop Price List/Order Form

Please feel free to use this form to pre order items from our souvenir shop. Your pre ordered items will be packaged together and distributed prior to your departure. Alternatively, you may wish to visit the souvenir shop prior to departure to browse the shelves and make you purchase.

Souvenir	Price	Quantity	Total Price
Aussie Bush Camp Sticker	\$2.00		
Aussie Bush Camp Wristband	\$2.00		
Aussie Bush Camp Lanyard	\$3.00		
Aussie Bush Tote Bag	\$5.00		
Aussie Bush Camp Hand Ball	\$5.00		
Aussie Bush Camp Drink Bottle	\$5.00		
Aussie Bush Camp Crystal	\$6.00		
Aussie Bush Camp Soft Toy Koala	\$8.00		
Aussie Bush Camp Soft Toy Kangaroo	\$8.00		
Aussie Bush Camp Snow Globe	\$8.00		
Boomerang	\$10.00		
Aussie Bush Camp Cap	\$10.00		
Souvenir Bag 1: Tote Bag, Drink Bottle, Sticker and your choice of a <input type="checkbox"/> cap or a <input type="checkbox"/> boomerang	\$15.00		
			Total:

Student Name: _____

School: _____ Amount Given: \$ _____

(MUST BE EXACT AMOUNT – NO CHANGE WILL BE GIVEN – CASH ONLY (NO CHEQUES))

If we are out of stock a suitable replacement of equal value will be substituted.

TEACHERS NOTE: Pre order forms and/or money is to be handed to management on arrival for safe keeping and preparation of pre ordered items