

Year 5/6 Camp 2022

MARANATHA RECREATION CAMP - YANDINA QLD

Monday 31st October – Wednesday 2nd November 2022

Dear Parents and Caregivers,

Due to unforeseen circumstances, our camp venue for 2022 has needed to be changed.

Students are now invited to attend and participate in activities at the Year 5/6 camp at **Maranatha Recreation Camp, Yandina Queensland**. The centre provides a range of services. Students will take part in activities such as high ropes, flying fox, kayaking, archery, bridge building, giant swing, Jacob's ladder, leap of faith, raft building, and a night adventure.

These camps are a great way for students to develop **confidence** by tackling new challenges and **independence** by being away from home. We hope that every student can attend.

Date: Monday 31st October – Wednesday 2nd November 2022 (Term 4 Week 4)

Cost: \$296.00

(Includes transport, meals, accommodation and activities on site)

Families are encouraged to utilise the Education Hardship funds made available to students from the NSW Government.

Important information

- Students will need to sign a behaviour **Code of Conduct** form which they must adhere to at camp and are encouraged to show positive behaviours at school to ensure they remain eligible to attend.

The P&C have student insurance which covers all children at school and during school activities outside the school including interstate school excursions. Ambulance cover **no longer exists** for excursions into Queensland. In the event of your child requiring an ambulance, please check with your private health policy if it has nationwide ambulance coverage.

Please complete the attached forms and return them to school by Friday October 14th, 2022.

Dane Baxter, Rod Cornelius and Emma Star-Webb *Year 5/6 Teachers*

Renee Beach Principal





MARANATHA RECREATION CAMP Permission note

I give permission for my child		
three-day camp at Maranatha Camp Yandina Que November 2 nd , 2022.	ensland in Term 4 – Monday Octob	oer 31 st - Wednesday
Medical		
My child has the following special needs (please pro allergies, sensory impairment etc) of which accompa		
In the event of injury or illness, I authorise (on my be may require. I am aware and understand that the ill Queensland Governments with regard to ambulance all costs if the need arises for my child to travel by an	reciprocal agreement between the Ne cover no longer exists. I understand	lew South Wales and
Staff members in attendance have emergency care of	qualifications.	
Please tick one:		
□ I give permission for my child to receive me	edical treatment if necessary	
□ I do not give permission for my child to rece	eive medical treatment if necessary	
I acknowledge that this event/activity is required to b 19 Public Health Orders and the NSW Department of accept that there is a risk that my child may be expo event. I confirm that my child will not attend if displ under public health orders.	of Education's policies and procedures osed to COVID-19 whilst attending ar	s. I acknowledge and not participating at this
PAYMENT METHOD:		
☐ I have enclosed \$296.00		
☐ I have paid \$296.00 by EFTPOS at school		
$\ \square$ I have paid \$296.00 using Parent Online Paymer	t. Receipt number:	
☐ I would like to pay \$296.00 using Education Hard	Iship Funds	
Parent/Caregiver Name: (please print)		
Signed:	Date:	



Medical information form: MARANATHA RECREATION CAMP

Privacy Advice

The information provided on this form is being obtained for the purpose of ascertaining relevant medical information, requirements and other health care related needs about your child who may participate in excursions, sporting activities or other educational or school activities conducted by or in conjunction with your school.

The information will be used by officers of the NSW Department of Education to assist planning, to support students and to minimise risks when conducting school excursions, sporting or other school activities.

Other persons or agencies that may be provided with information include, but are not limited to, volunteers and members of external organisations who join with the school or are otherwise involved in the planning or delivery of the excursion, sporting or other school activity; and persons that may be called upon to provide health care treatment or other assistance during or as a consequence of such excursions or activities.

Provision of this information is not required by law. However a failure to provide the information may mean that your child can not participate in a particular excursion or school activity. In such circumstances the school will make available an alternative educational experience.

Provision of the information will significantly assist the school in planning a safer educational activity.

This information will be stored securely. If you have any concerns about provision of this information, please contact the school principal to discuss further. You may correct any personal information at any time by contacting the school office.

Student Name	Class		
Medicare Number - optional			
Parent or caregiver contact details			
Name:			
Address:			
Home phone: Work phone:	Mobile phone:		
Doctor contact details			
Bootor Cornact actains			
Name:			
Address:			
Doctor's telephone: 1 2			
Medication			
All prescribed medication must be provided in a blister pack provided by your Pharmacist clearly labelled with your child's name, medication type, dosage, and time(s) to be administered.			
Medication:			
Dosage/Time(s)			



WATER ACTIVITY ADVICE FORM

Planned v	water	activities:	ΜΔΡΔΝΔΤΗΔ	RECREATION	САМР
i iaiiiieu v	water	activities.		INCONEATION	

		Kayaking			
		Swimming			
	'	J			1
<u>Decla</u>	ration by parent/carer				
1.	• •	ed swimming activities, d leave all others blank)		my child is	a:
	□ Non swimmer – m	ny child is unable to swir	m		
	☐ Weak swimmer –	my child is not a confide	ent swimmer o	or is not co	omfortable in the water.
	☐ Average swimmer	r – my child is a reasona deep or fast water.	able swimmer	but is not	very strong or confident in
	☐ Strong swimmer -	- my child is a strong sw	vimmer and is	very confi	ident in deep or fast water.
2.	(For each line, tick of a. My child of	posed swimming activitione box and leave the coan tread water	others blank)	hat: □ NO □ NO	
	-	can float on water Its may have to underta	☐ YES ke a swimmin		ncy test.
3.	•	e above information reg leave all others blank)	arding swimn	ning activit	ies and
	☐ I consent to my c	hild participating in the	swimming act	ivities	
	☐ I do not consent t	o my child participating	in the swimm	ning schem	1е
Parent	/Caregiver Name: (please	print)			
Signed	l:		Date:		

Activities



CODE OF CONDUCT

EVENT: MARANATHA RECREATION CAMP Monday 31st October - Wednesday 2nd November 2022

PREFACE

Excursions form an important part of the curriculum covering a variety of KLAs across all grades. Each excursion must comply with the guidelines set by the Department of Education. As such Risk Management is a key issue, which is central to the planning of any excursion.

DEFINITION

All students are eligible to attend excursions as they arise throughout the year. If however a student's behaviour has demonstrated that they have on a number of occasions been unable to comply with the School's Code of Conduct, their invitation to attend excursions may be withdrawn at the Principal's discretion in consultation with the Grade Supervisors and Assistant Principals.

Any student, who has been placed on a formal school detention on a number of occasions, has been placed on internal suspension or been the subject of a period of formal suspension from school can expect that their participation in any school excursion will come under review. End of year excursions, inter school participation, school sports teams and subject based excursions are all considered under the umbrella of this policy.

EXPECTATIONS

The Cudgen Public School Code of Conduct will apply throughout the duration of all school excursions. In addition to these activities, the following rules will apply:

- students must behave at all times in a manner that brings only credit to themselves, their families and the school.
- no swearing, noisy, disruptive, dangerous or other unsuitable behaviour at any time
- · follow teachers' instructions at all times

Breaches of any school rule, special rules (above), or any failure to act responsibly on the part of any student, will result in immediate disciplinary action by the teacher in charge. This may involve parents being contacted and/or the student being sent home at additional cost to the parents. Subsequent disciplinary action will be at the absolute discretion of the Principal. By signing and giving consent to the participation of their student to this activity, the parent/guardian and student are agreeing to be bound by the terms, rules and conditions outlined above.

I agree to abide by the Cudgen Public School rules to Be Safe, Be Respectful and Be an Active Learner.

Student Name:	Signature:
Date:	
Signature of Parent:	