
2022 YEAR 5&6 CAMP BIRRIGAI OUTDOOR SCHOOL

Dear Families,

As part of the learning program, Year 5 and Year 6 will be travelling to Birrigai Outdoor School for a three-day camp from **Tuesday 6 December to Thursday 8 December 2022.**

Due to ongoing COVID safe and guidelines, we have decided to hold our Year 5 and Year 6 camp within the ACT. This will give us as a school more options should we need to adjust the program due to health advice.

Students will engage in a variety of individual and team challenges designed to develop skills in decision-making, problem-solving, leadership, self-confidence, self-awareness and teamwork. The program will complement many of the 2022 units of work and whole school initiatives including our social skills program.

Some of the program activities may include:

- giant swing;
- vertical play-pen (ropes course);
- bushwalks; and
- crate climb

Where: Birrigai Outdoor School
When: Tuesday 6 December to Thursday 8 December 2022
Transport: Qcity Bus
Time: Arrive at school: 8:30am on 6 December
Depart School at 9:15am Arrive at Birrigai: 10:00am on 6 December
Depart Birrigai at 1:45pm Arrive school 2:30pm on 8 December
Cost: \$335.00 (A payment plan can be set up through Sharlot our Business Manager)

Further notes will follow and will outline all clothing requirements and other important information for overnight excursions.

Please read and sign the attached permission note. We have also included a campers' agreement. Please discuss this with your child and ask them to sign the agreement with you after discussion.

As this is a overnight excursion, we require ALL families to fill in the attached medical form. We require families to include information about medications that may need to be administered during the excursion as well as any dietary requirements.

This is an optional activity to enrich curriculum outcomes, a payment will be required to cover the costs. If the school is unable to cover the costs, the school may not be able to provide this excursion. Individual records of contributions are confidential.

Kind regards,
Jodie White
Primary Years Executive
28 July 2022

**Please return permission notes by Wednesday 16 November 2022
(Week 6 Term 4)**

PERMISSION NOTE FOR YEAR 5/6 CAMP AT BIRRIGAI OUTDOOR SCHOOL, Tidbinbilla, ACT

I give permission for my child.....of class.....to attend the camp at Birrigai Outdoor School for a three-day camp from Tuesday 6 December to Thursday 8 December 2022.

I authorise the school to decide for the welfare of the student, including emergency medical attention, phone calls home or collection of my child if required. I agree to meet any costs associated with any emergency arrangement made by the school.

I agree that my child will be under the authority of the school for the duration of the camp, and that the school may contact myself to collect my child due to illness or consistent inappropriate behaviour if the school considers that circumstances warrant such action.

I have completed

- Form 1. Permission note to attend Birrigai Outdoor School
- Form 2. Camper's agreement
- Form 3. Medical information form (2 pages)
- Form 4. Dietary requirements, travel sickness information
- Form 5. Payment form

Parents/ Guardian Contact Details

Daytime contact 1 - Name:Phone:

Daytime contact 2 - Name:Phone:

Night time contact 1 - Name..... Phone:

Night time contact 2 - Name..... Phone:

Name of Parents/ Guardian

Signature of Parents/ Guardian Date:.....

Staff accompanying students on excursions will take all reasonable care while the students are in their charge to protect them from injury and to control and supervise their behaviour and activities.

Parents should be aware that staff members are not responsible for injuries or damage to property which may occur on an excursions where, in all circumstances, staff have not been negligent. Parents should warn children of the risk to themselves, to others and to property, of impulsive, wilful or disobedient behaviour.

If students choose to engage in behaviours which are considered inappropriate and harmful to others, parents/carers may be contacted and asked to collect their child from the excursion.

The ACT Education Directorate does not provide any insurance cover for injury, disease or illness to students resulting from school activities or school-organised excursions. Claims for compensation are met where there is a legal liability to do so. Liability is not automatic and depends on the circumstances in which any injury, disease or illness was sustained.

As there is no automatic insurance cover for personal injury if your child is injured at school or during a school organised activity/excursion you should therefore consider whether taking out personal insurance cover for your child is warranted.

This insurance might cover contingencies including medical/hospital expenses, ambulance transport outside the ACT, and cancellation of transport/accommodation or loss of/damage to luggage.

*The ACT Ambulance Service provides free ambulance transport for students who are injured or suddenly become ill at school or during an approved school organised activity **within the ACT***

**CAMPER’S AGREEMENT- Years 5 & 6 – Camp to BIRRIGAI OUTDOOR SCHOOL:
6 December – 8 December 2022**

Code of Behaviour on Camp

The following expectations are part of the Farrer Primary Positive Behaviour for Learning (PBL) program. These expectations are based around being safe, respectful, responsible learners. The expectations are for all settings at Farrer and will also be the expectations at camp.

Be SAFE:

- we care for each other
- we use safe hands and feet
- we walk inside buildings
- we stay in bounds

Be RESPECTFUL:

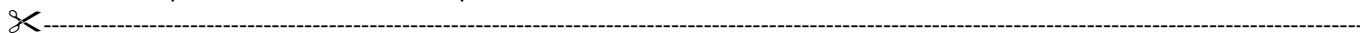
- we follow instructions
- we speak kindly
- we take turns
- we care for equipment and environment
- we play by the agreed rules

Be RESPONSIBLE:

- we own our behaviour
- we are in the right place at the right time
- we ask for staff help when needed
- we are water wise and waste wise

Be a LEARNER:

- we take part in learning
- we do our best
- we are prepared
- we respect everyone’s right to learn
- we represent our school with pride



CAMP AGREEMENT

Student Agreement

I, (student name) have read the above information and agree to follow this Code of Behaviour.

..... (Student Signature)

Parent/Caregiver Agreement

I have read the above information with my child and discussed the Code of Behaviour. I agree to collect my child from camp (Birrigai Outdoor Centre, next to Tidbinbilla, ACT) if the teachers decide it is necessary to do so.

..... (Name printed)

..... (Parent/Caregiver signature)



MEDICAL INFORMATION AND CONSENT FORM

Instructions

This form must be completed by the parent/carer of each student in an ACT public school. The form is used to request general medical information about students and provides for parents/carers to consent to first aid treatment for their child/ren in line with the directorate's First Aid Policy and First Aid General Procedures. This form must be completed annually. Parents/carers must inform the school immediately if there are any changes to the information provided within the form.

Section A – Personal Details (please fill in clearly)					
Student's Name			Date of Birth		Gender M <input type="checkbox"/> F <input type="checkbox"/>
School			School Year		
Parent/Carer Name			Address		
Telephone Contact	Mobile		Home		Business
Emergency Contact 1				Telephone	
Emergency Contact 2				Telephone	
Name of Qualified Health Professional				Telephone	

Section B – Medical Information	
Please tick if your child suffers any of the following:	
<input type="checkbox"/> Allergies <input type="checkbox"/> Blood Pressure <input type="checkbox"/> Epilepsy* <input type="checkbox"/> Hay Fever <input type="checkbox"/> Nose Bleeds <input type="checkbox"/> Anaphylaxis* <input type="checkbox"/> Diabetes* <input type="checkbox"/> Fainting <input type="checkbox"/> Headaches <input type="checkbox"/> Reaction to Drugs <input type="checkbox"/> Asthma* <input type="checkbox"/> Eczema <input type="checkbox"/> Fits or blackouts <input type="checkbox"/> Heart Condition <input type="checkbox"/> Sight/Hearing Problems	
*Please complete and attach a <i>Known Medical Condition Response Plan</i> <input type="checkbox"/> Sun Screen Sensitivity	
<input type="checkbox"/> Other (please specify)	
Please identify whether your child is presently taking any medication:	
	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, the parent/career must give written permission and direction for the administration of any medication at school or during school related activities, as follows:	
<ul style="list-style-type: none"> For a short term, non-ongoing medical condition (e.g. antibiotics for a period of 10 days) please complete the <i>Medication Authorisation and Administration Record</i> and provide qualified medical professional's authorisation (a copy of the medical prescription is sufficient in the case of short term administration of medication). For long term, ongoing administration of prescribed medication complete the <i>Medical Information and Consent Form</i>, the <i>Known Medical Condition Response Plan</i> and the <i>Medication Authorisation and Administration Record</i>. 	
If your child requires medication, please provide a summary of dosage here: <i>(the school will also contact you for more information and request other paperwork to be completed)</i>	
Date of last tetanus injection	
Are you aware of any physical or psychological limitations of your child (please specify)?	
Is there any other information which you believe may be relevant to the general medical/health care of your child?	

Section C – Parent/Carer Authorisation

1. In the case of my child requiring medical treatment or in the case of a medical emergency, including an anaphylaxis or asthma emergency, I consent to:
 - a. the provision of first aid;
 - b. the provision of analgesics;
 - c. treatment as outlined in the attached *Known Medical Condition Response Plan* (where relevant).
2. I authorise the school, where it is impracticable to communicate with me, to arrange for my child to receive such medical or surgical treatment as may be deemed necessary.
3. I undertake to pay any costs that may be incurred for the medical treatment, ambulance transportation and medications. NB: Parents/carers should note that in the absence of a *Known Medical Condition Response Plan*, in cases of emergency excepting anaphylaxis or asthma, only standard first aid will be administered. In an anaphylaxis or asthma emergency authorised medications; salbutamol (for the symptomatic treatment of asthma), and adrenaline (for the treatment of anaphylaxis) will be administered.

Parent/Carer Signature

Date

The Directorate collects the information contained in this form to provide or arrange first aid and other medical treatments for students. The information collected will be held at the student's school and will be made available to relevant school staff, including first aid officers, and to medical or paramedical staff in the case of an accident or emergency. The information contained in the form is personal information and it will be stored, used and disclosed in accordance with the requirements of the *Information Privacy Act 2014* and the *Health Records (Privacy and Access) Act 1997*.

SPECIAL DIETARY REQUIREMENTS FOR MY CHILD:

Child's name: _____

Class: _____

Please include information about allergies/intolerances or cultural requirements about food:

TRAVEL SICKNESS

My child _____ **does/does not** (please circle) suffer from travel sickness.

My child travel sickness is management is as followed:

Please include name of medication and dosage (if required) – *the school may contact you for more information:*

PAYMENT FORM

YEAR 5/6 CAMP TO BIRRIGAI OUTDOOR SCHOOL, Tidbinbilla, ACT

Tick Payment Type for the amount of \$335.00 payment is due by 16 November 2022 (Wk6 Tm4)

1. Cash

2. **QUICKWEB (preferred payment method)** by going to **Farrer Primary School's Website** click on the **PAYMENT TAB**, you will be redirected straight to our Westpac Bank account, (this is a secure page). Enter the information when requested. **FEE Code: Birrigai56**

3. EFTPOS at the Front Office

4. Payment plan

Spoken with Sharlot and completed a signed agreement on _____

Student Name: _____ in class _____ 2022

Front office use only

CASH / QUICKWEB / EFTPOS

Date payment was completed: _____

Staff member: _____