



FARRER PRIMARY SCHOOL

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Principal: Liz Wallace

2023 Year 3 and Year 4 Camp – BIRRIGAI OUTDOOR SCHOOL

Dear Families,

The following details relate to an educational overnight camp to **Birrigai Outdoor School**, which is being organised for Year 3 and Year 4 students.

The staff at Birrigai have tailored a program to meet the needs and interests of our Year 3 and Year 4 students. Some of the program activities <u>may</u> include:

- crate climb;
- campfires and damper making;
- bushwalks.

Dates/time	Monday 4 December – Tuesday 5 December
Purpose of excursion	The students will be involved in team building and outdoor education activities. They will engage in a variety of individual and team challenges designed to develop skills in decision-making, problem-solving, and teamwork, as well as activities that support learning covered in 2023.
	Children will stay in cabins overnight with some of their chosen friends.
Venue	Birrigai Outdoor School, Tidbinbilla Rd, Tharwa, ACT (next to Tidbinbilla)
	Seat belt equipped coaches operated by CDC Canberra
Transport	Depart Farrer PS at 9:15am on MONDAY 4 December (PLEASE arrive at FPS at 8:30am)
	Return to Farrer PS approx. 2:45pm on TUESDAY 5 December
Attending Staff	Year 3 teachers – Sarah Otuhouma & Tori Barbaro Year 4 teachers – Bright Lai & Lara Wilson Senior Team Leader – Jodie White
What to bring	A packing list will be provided closer to camp along with other travel information
Cost	\$180.00 covering transport, program, meals provided at camp venue and accommodation
Return Notes & Payment	Friday 10 November 2023 (Week 5 Term 4) Permission notes will <u>not</u> be accepted after this date because we are required to give final numbers to Birrigai Outdoor School prior to the camp.

The school has made every effort to keep cost for this excursion at a minimum level. If necessary, parents or students can confidentially discuss support to meet the cost of the excursion with the School Executive or Business Manager. Please contact the front office if you would like to speak with School Executive or Business Manager.

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

As this is an excursion which involves an overnight stay, ALL families must 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.

Jodie White
Senior Years Executive
17 August 2023

TO BE RETURNED TO SCHOOL

<u>PERMISSION NOTE - YEAR 3 AND YEAR 4 CAMP -</u> BIRRIGAI OUTDOOR SCHOOL, THARWA, ACT

I give permission	for my child	in class	to attend the
Year 3 and Year 4 2023.	camp at Birrigai Outdoor School, Tharwa, ACT,	from Monday 4 December to Tues	day 5 December
any costs that ma	e school to decide for the welfare of my child, ay be associated with any emergency arrangem ers should note that free ambulance transport	ent made by the school.	ition. I agree to mee
contact myself to	y child will be under the authority of the school collect my child due to illness or consistent ina arrant such action.		
☐ I understand t	hat my child will travel by coach to and from Bi	rrigai Outdoor School.	
I have completed □Form 1. □Form 2. □Form 3. □Form 4. □Form 5. Parents/ Guardia	Permission note to attend Birrigai Outdoor So Camper's Code of Behaviour Medical information form (2 pages) Dietary requirements, travel sickness information Payment form		
Daytime contact	1 - Name:	_ Phone:	
Daytime contact	2 - Name:	_ Phone:	
Night time conta	ct 1 - Name:	_ Phone:	
Night time conta	ct 2 - Name:	_ Phone:	
Name of Parent /	guardian:		
Parent/ guardian	Signature:	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 excursion 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, willful or disobedient behaviour.

If students choose to engage in behaviours which are considered inappropriate and harmful to others, they will be returned to their homes and the costs involved will be the responsibility of the parents.

The ACT Education Directorate does not provide any insurance cover for injury, disease or illness to students resulting from school activities or schoolorganised 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 CODE OF BEHAVIOUR -

Years 3 & 4 – Camp to BIRRIGAI OUTDOOR SCHOOL:

4 December – 5 December 2023

Code of Behaviour on Camp

The following expectations are Farrer Primary's ALL SETTINGS Positive Behaviour for Learning (PBL) expectations. These expectations are based around being safe, respectful, responsible learners. They will also be required to be shown whilst on camp.

Be SAFE:

- we care for each other
- o we use safe hands, feet and bodies
- o we walk up and down stairs
- we stay in bounds

Be RESPECTFUL:

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

Be RESPONSIBLE:

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

Be a LEARNER:

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

X		
		CAMP CODE OF BEHAVIOUR
Student Ag	greement	
l,	(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 School, Tharwa, ACT) if the teachers decide it is necessary to do so.

(Name printed)	(Parent/Caregiver signature)

Form 3.

TO BE RETURNED TO SCHOOL (1 of 2 pages)



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 De		<u>'</u>								
Student's Name	talis (pieas	e IIII III CII	earry		Da	te of Birth				
Gender	M □ F □ Non-binary □ They use different term (please specify) □ Prefer not to say □									
School	101		- They	use u	1	hool Year	Jiedae apeeny)			
					-					
Parent/Carer Name					Ad	ldress				
Telephone Contact	Mobile			Hoi	me		1	Business		
Emergency Contact 1				•			Telephone			
Emergency Contact 2							Telephone			
Name of Qualified Healt	th Profession	onal					Telephone			
Section B – Medical Info	rmation									
Please tick if your child s	uffers any	of the fo	llowing:							
☐ Allergies (please spec	ify)		🗆 🛭	Blood	Pres	sure \square E	pilepsy* 🗆 F	lay Fever □	Nose Ble	eds
☐ Sun Screen Sensitivity	☐ Fainti	ing 🗆 F	Reaction to Drug	gs (plea	ase s	specify)			ema 🗆	Headaches
☐ Anaphylaxis* ☐ Diab						n 🗆 Sigh	t/Hearing Prob	olems 🗆 Ast	hma*	
*Please complete and atta		n Medica	l Condition Resp	onse I	Plan					
☐ Other (please specify)										
Please identify whether	your child	is presen	tly taking any m	nedica	tion	:			Yes □	No □
If yes, the parent/career related activities, as follo		written pe	ermission and di	irectio	n fo	r the admir	nistration of ar	ny medication	n during so	chool
• For a short term, non-ongoing medical condition (e.g. antibiotics for a period of 10 days, or antihistamines) please complete the <i>Medication Authorisation and Administration Record</i> and if necessary, 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>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:										
(the school will also contact you for more information and request other paperwork to be completed as mentioned above)										
Date of last tetanus injec	tion									
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?										

Form 3. TO BE RETURNED TO SCHOOL (2 of 2 pages)

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.

symptomatic treatment of astrima), and agrenaline (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*.

2023 Year 3 and Year 4 Camp - BIRRIGAI OUTDOOR SCHOOL

TO BE RETURNED TO SCHOOL

SPECIAL DIETARY REQUIREMENTS FOR MY CHILD:

Child's name:	Class:
	allergies/intolerances or cultural requirements about food – the school <u>will</u> send home an ai should you inform the school of any dietary requirements:
	TRAVEL SICKNESS
My child	does/does not (please circle) suffer from travel sickness.
	My child's travel sickness is managed as follows:
Please include name of medication	on and dosage (if required) – the school may contact you for more information:

Form 5.

Cost of this excursion: \$180.00

TO BE RETURNED TO SCHOOL

PAYMENT FORM

2023 Year 3 and Year 4 Camp BIRRIGAI OUTDOOR SCHOOL, THARWA, ACT

Student Name:		in class	2023		
Suggested Payment Sched	ule				
Final payment is due by 10	November 2023 (Wk5 Tn	n4)			
Payment	Amount		Date		
Deposit	\$60		Friday 1 September 2023		
2 nd Payment	\$40		Friday 15 September 2023		
3 rd Payment	\$40		Friday 13 October 2023		
Final Payment	\$40		Friday 10 November 2023		
 □ 2. QUICKWEB (preferred click on the PAYMENT TAB page). Enter the information □ 3. EFTPOS at the Front 	B, you will be redirected stron when requested. FEE Co	aight to our Westpac	y School's Website Bank account, (this is a secure		
☐ 4. Alternate Payment p Spoken with Jenny a	olan nd completed a signed agr	eement on			
Front office use only CASH / QUICKWEB /	EFTPOS				
Date payment was comple	ted:				
Staff member:					