



GLENHAVEN PUBLIC SCHOOL

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27 June, 2022

Dear Parents/Caregivers,

YEAR 5 – GREAT AUSSIE BUSH CAMP

This note is a short reminder that our camp will commence on **Monday 10 October 2022**. Please note that this is **Day 1 Term 4**. Students are reminded that they **are to be at school at 8.30am**.

Dates:	Monday 10 October – Wednesday 12 October, 2022
Transport:	Students will be travelling to and from the venue by seat-belted coach
Time:	8.30am for departure at 9.00am – the coaches will not be able to wait for late arrivals. We will be returning back to school on Wednesday 12 October, 2022 at approx 3.00pm
Lodging:	Great Aussie Bush Camp, Kincumber South
Cost:	Total cost of camp is \$310.00. The final payment of \$210.00 will be included on the Term 3 Account and is required to be paid in full by Friday 22 July, 2022.

Any medication must be clearly labelled with the child's name, class and dosage instructions. Medicines will then be collected by teachers prior to departure. Please ensure all medication is in its original packaging then placed in a clear zip lock bag labelled with your child's name.

Once at the Great Aussie Bush Camp, students will not be permitted to phone home. If an emergency arises and you wish to contact your child, Great Aussie Bush Camp can be contacted on (02) 4997 3044.

Medical and Dietary Information must be returned by **Friday 19 August 2022** so that we can forward pertinent information.

What to Bring: (Please ensure everything is labelled). It is a good idea to let the children pack their own bags so they know where things are and what they will need to pack to bring home. A good idea is to place the items on the bed and to make sure that all items are packed into the bag.

Own pillow Refillable water bottle Plastic cup used for morning/ afternoon tea and supper) Sleeping bag (weather appropriate) Sun cream and hand sanitiser Insect repellent Tissues Small backpack (used as a day pack) Thongs for showers only Bath Towel Toiletries - toothbrush/toothpaste/soap/washer/ comb/brush Hat Pyjamas Underwear x 3, socks x 3 Warm Jacket	Casual clothes – (It is important to dress in layers as days may be warm, however nights and mornings can still be cold.) T-Shirts, Sloppy Joe, trackpants, beanie, gloves, shorts (no singlet's, minishorts or midriff tops – be aware that one set will get very muddy – make them old) Raincoat / windproof spray jacket Closed shoes (2 pairs) - joggers and a spare pair (old pair that will get muddy) Plastic bags (for dirty clothing) Torch Beach towel and swimmers NO mobile phones including camera phones, MP3 players, iPods NO lollies, chocolate or any peanut related items
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Please be advised that there is a risk of contracting Covid at any event. Under current government guidelines, each person participating in school camps are **encouraged to complete a RAT within 24 hours of attending the camp**. **If your child is identified as a household contact, they will NOT be able to attend camp**, even if they are not exhibiting any symptoms. If a student contracts Covid at camp they will need to be collected by a parent.

MEDICAL FORM

School: Glenhaven Public School School Year: Class:

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? Yes No

If Yes, Please Specify?

In the event of an emergency and I am unable to be contacted, I authorise my child receiving such medical treatment that is deemed necessary. I also undertake to cover any costs that may be incurred with any medical treatment received, ambulance transport and medication while my child is at Camp.

Students will be travelling by private coach. I also agree to my child travelling on these buses while at camp.

I acknowledge that this event/activity 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.

Full Name of Parent Guardian:

Signature: Date ____ / ____ / ____

CURRENT MEDICATION / DIETARY REQUIREMENTS

School: Glenhaven Public School Student Name: Class:

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. If medication is prescribed prior to camp please send with pertinent details.

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

In relation to any proposed water or swimming activities, my child: Name: is a
(Please tick ✓ one :)

STRONG SWIMMER AVERAGE SWIMMER POOR SWIMMER NON-SWIMMER

Rapid Antigen Test:

I give permission for my child to complete a Rapid Antigen Test (RAT) whilst at camp, if they or someone in their cabin / group develops symptoms
(Please tick ✓ one :)

YES NO If no is indicated and any students display symptoms where we are unable to complete a RAT, your child will need to be collected from the camp.

If my child contracts Covid at camp, I will collect them from the camp.

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