Dear Parents,

**Year 5 Camp 2014 – EXPRESSION OF INTEREST**

We are offering your child the opportunity to participate in camp that has been booked for our Year 5 students. The camp will be held at Currimundi Active Recreation Centre on Monday 4 August to Wednesday 6 August 2014. Chartered coaches will leave school on Monday morning at 9 am and will return by 3 pm on Wednesday. The focus areas of the camp are:

- **Personal Leadership** – activities are delivered on a way that highlights and/or aims to develop the participant's decision making ability, decisiveness, inclusiveness, goal setting and evaluation.

- **Team building** – Activities are delivered with a focus on encouraging groups to explore the concepts of dynamics, conflict resolution, negotiation, camaraderie and loyalty.

The camp activities are delivered by trained instructors as well as our Year 5 teachers who accompany the children for this camp. The camp provides cabin style accommodation, communal toilet and shower facilities, and a catering service in the dining hall.

The activity Program for the camp will be issued at a later date, and will include canoeing, kite building, orienteering, circus skills, high ropes, catapults, mini Olympics, and night time activities. A clothing list will also be issued at a later date.

Please return this Expression Of Interest form by **3 pm, FRIDAY 6 JUNE 2014** to the school office. Please note this is an Expression of Interest form only – PLEASE DO NOT SEND ANY MONEY WITH THIS FORM.

Deposits will be accepted from **8 am MONDAY 16 JUNE 2014** on the condition that all School Resource Scheme – SRS – fees have been paid in full. A deposit of $50 is requested.

Full camp payment will be required to be paid by **12 noon on WEDNESDAY 30 JULY 2014**. No monies will be accepted after this time.

Ninety places are available on a first deposit paid, first place allocated basis providing that SRS fees are paid in full.

The approximate cost of the camp will be **$175 all inclusive** (camp and bus travel). This will finalised and invoiced to you during the week beginning **TUESDAY 10 JUNE 2014**.

Tim Adsett
Deputy Principal – Humpybong State School
Year 5 Camp 2014 Consent Form

Consent
Please complete the required information and check all appropriate boxes below to indicate your agreement/consent:

☐ I have read all of the information contained in this form in relation to the activity (including any attached material) and I am aware that the Department of Education, Training and Employment does not have personal accident insurance cover for students.

☐ I give consent for my child, ______________________________ (print child’s name) in class _______ (print class details), to participate in the activity detailed above.

☐ I agree to pay to the school the costs detailed above for my child’s participation in the activity.

☐ In the event of an accident or illness, I authorise school staff to obtain or administer any medical assistance or treatment my child may reasonably require, including contacting my child’s doctor.

☐ I have provided the school all relevant details relating to my child’s medical or physical needs on enrolment and where relevant have updated this information.

☐ I accept liability for all costs incurred in obtaining such medical assistance or treatment (including any transportation costs) and undertake to reimburse the State of Queensland (via the Department of Education, Training and Employment) the full amount of any costs incurred on my child’s behalf.

Parent/Carer Name: ____________________________________________ (Please Print)

Parent/Carer’s Signature: ___________________________ Date: __________/________/_______

Additional medical information
The school collected medical information about your child at enrolment. This information is stored in OneSchool. Please give full details of any new or changing conditions (medical, physical or management) which may affect your child’s full participation in the activity described in the form.

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

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You may also wish to provide the following information*:
Name of child’s medical practitioner: ___________________________ Telephone No.: ___________________________
Medicare No.: ___________________________
Private Health Insurance Company (if provided): ___________________________ Membership No.: ___________________________

*If an enrolment form for your child has been completed or updated since October 2012 this information will already be recorded in OneSchool.

☐ I would like this additional information about my child’s medical and physical details to be recorded in OneSchool records.

Privacy Notice
The Department of Education, Training and Employment is collecting the personal information requested in this form in order to:
- obtain lawful consent for your child to participate in the activity;
- help coordinate the activity;
- respond to any injury or medical condition that may arise during, or as a result of the activity; and
- update school records were necessary.

The information will only be accessed by authorised school staff and will be dealt with in accordance with the confidentiality requirements of s.426 of the Education (General Provisions) Act 2006 (Qld) and the Information Privacy Act 2009 (Qld).

The information will not be disclosed to any other person or agency unless it is for a purpose stated above, the disclosure is authorised or required by law, or you have given DET permission for the information to be disclosed.

Activity Risks & Insurance
The activity outlined above carries an inherent risk of physical injury occurring. Please note that the Department of Education, Training and Employment does not have personal accident insurance cover for students. If your child is injured as a result of an accident or incident, all costs associated with the injury, including medical costs are the responsibility of the parent/carer. Some incidental medical costs may be covered by Medicare. If you have private health insurance, some costs may be also be covered by your provider. Any other costs must be covered by parents/carers. It is up to all parents/carers to decide what types and what level of private insurance they wish to arrange to cover their child. Please take this into consideration in deciding whether or not to allow your child to participate in this activity.

Queensland Government

Uncontrolled copy. Refer to the Department of Education, Training and Employment Policy and Procedure Register at http://ppr.det.qld.gov.au/ to ensure you have the most current version of this document. TRIM 12/330679