



31 January 2024

Dear parents and carers,

YEAR 6 CAMP BORAMBOLA SPORT AND RECREATION CENTER

The following details relate to an educational excursion to Borambola Sport and Recreation Centre which is being organised for year 6 students.

Purpose:	This camp is an integral part of the school's curriculum focussing on outdoor adventure, team building and resilience through participation in the planned activities. Further information about Borambola Sport and Recreation Centre can be accessed on their website https://www.sport.nsw.gov.au/sport-and-recreation-centres/borambola
Day/Date:	Monday 18 March to Wednesday 20 March 2024
Timetable:	Departing Chapman Primary School at 8.00 am Monday 18 March 2024 Returning to Chapman Primary School by 4.30 pm Wednesday 20 March 2024 Drop-off and Pick up will be in the Perry Drive School Carpark
Venue:	Borambola Sport and Recreation Centre 1980 Sturt Highway, Borambola, NSW
Transport:	Coach with fitted seatbelts
Camp Registration Requirement	Your Online Camp Registration must be completed by Monday 26 February 2024 All students attending the year 6 camp at Borambola Sport and Recreation Centre must complete the online registration at the above link.
Cost:	\$395.00 <i>Costs outlined below</i>
Payment and Permission due by	Permission form Wednesday 7 February 2024 Deposit by Monday 12 February 2024 Final Payment by Monday 11 March 2024

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

Suggested Payment Plan		
Payment	Cost	Due Date
Deposit	\$130	Monday 12 February 2024
Payment 2	\$130	Monday 26 February 2024
Final Payment	\$135	Monday 11 March 2024

To discuss alternative payment plan options please contact the Business Manager on 6142 2400

Group size	67	Ratio:	1:11
Teacher in charge:	Jodi de Ligt		
Accompanying Staff	Jodi de Ligt, Emma Pryor, Daniel Gatwood, Rachel Tollis, Riley Bacon and Nicki Johannes		
Accommodation	Dormitory-style lodge accommodation and private rooms adjacent for teachers.		
Meals	<p>All daily healthy and nutritious meals will be provided by the Borambola qualified catering team. Special dietary requirements for medical conditions, religious beliefs and lifestyle choices such as vegetarians or vegans can be catered for. Please complete the Dietary Requirements on the attached permission form.</p> <p>Please provide a snack for day one of camp. Please pack a simple fruit / snack in disposable packaging to be eaten at a stop on the way to camp. Please also bring a refillable water bottle. These should not be packed in luggage.</p> <p>No other food should be provided by families for camp including snacks such as confectionery, chips and lollies.</p>		
Activities	Activities will include Swimming, Mud Run, Pioneering, Chain Reaction, BMX, Fencing, Archery, Initiatives, Circus Skills		
Swimming Requirements	<p>As part of the year 6 camp program children will have the opportunity to spend supervised time in the Borambola swimming pool.</p> <p>In order for your child to enter the pool and participate in swimming activities they may be required to undergo the Royal Life Saving Society ACT Survival Challenge Proficiency Test and be allocated with identification relevant to the outcome of testing.</p> <p>Staff Qualifications</p> <p>Two Chapman Primary School staff members attending this camp are trained First Aid officers with Bronze Medallion qualifications.</p> <p>Please ensure you complete the Permission for Aquatic Activities portion of the attached Year 6 Camp permission if you wish your child to be able to spend time in the swimming pool.</p>		
What to bring	<p>Please see attached packing list.</p> <p>Please ensure all items are clearly labelled with student’s full name.</p> <p>Please provide a healthy snack / fruit for the first day of camp (18 March) in disposable packaging along with a refillable water bottle.</p>		
What to wear	Active wear (appropriate for weather conditions) and a sun smart hat.		
Excursion Risk Assessment: Available from the front office			
Emergency Contact for this excursion: Chapman Primary School 02 6142 2400			
Contingency:	Should the camp not proceed on the scheduled dates it will be postponed until a later date where possible, or cancelled and full refund offered.		
Behavioural Expectations:	Students are expected to demonstrate Chapman FRIENDS values and the PBL expectations of being safe, responsible and respectful.		

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, wilful, or disobedient behaviour.

Important dates for the administration process of this camp if you would like your child to attend:

- ☐ **Wednesday 7 February** all permission and medical forms must be returned to register your intent to attend.
- ☐ **Monday 12 February** Deposit of \$130.00 to be made to the school as per the attached Chapman Primary Payment Form.
- ☐ **Monday 26 February** complete [Online Camp Registration](#).
- ☐ **Monday 11 March 2024** complete full payment to the school for this camp

Yours faithfully

James M. Barnett
Principal

Camp Recommended Packing List	
What to bring	
Clothing	Additional non-clothing items
<p>Please ensure all items are clearly labelled with student's full name.</p> <ul style="list-style-type: none"> <input type="checkbox"/> t 'shirts (long/short) <input type="checkbox"/> shorts <input type="checkbox"/> long pants (track pants are most practical) <input type="checkbox"/> socks and underwear <input type="checkbox"/> pajamas <input type="checkbox"/> jumper/s <input type="checkbox"/> 1 x sunsmart hat (broad brim) <input type="checkbox"/> Waterproof rain jacket <input type="checkbox"/> 2 x suitable pair of walking shoes <input type="checkbox"/> Swimming costume, Rashi and Swim shorts <p><i>Clothing that can be layers is most practical for camps as items can be put on or removed as weather conditions and activities change</i></p>	<ul style="list-style-type: none"> <input type="checkbox"/> Toiletries <input type="checkbox"/> Insect repellent and sunscreen <i>Sunscreen is supplied by the school however if your child has sunscreen sensitivity you may wish to pack your own)</i> <input type="checkbox"/> 2 x towels <input type="checkbox"/> Plastic bag for dirty or wet clothes <input type="checkbox"/> Pillow with pillowcase <input type="checkbox"/> Sleeping bag or Doona and 2 single flat sheets <input type="checkbox"/> Water Bottle <input type="checkbox"/> Packed lunch and recess for first day <input type="checkbox"/> Day pack <input type="checkbox"/> Personal medications (please see below)
DO NOT BRING	
<ul style="list-style-type: none"> ✗ Aerosol cans (i.e., spray-on deodorant or insect repellent) ✗ Any food, including snacks, confectionery, chewing gum or soft drink etc. (other than recess and lunch for day 1.) ✗ Personal electronic devices/iPods/iPads, cameras or phones or other electronical devices. ✗ Jewellery, money or other valuables. <p>Students will be reminded to leave these items with parents prior to departure.</p>	

Requirements for Student Medication at camp:

If your child had medication and plans held at the school on a permanent or long-term basis, these will be transported to camp.

Preparing and providing medication for you child at while at camp.

If your child will need medication administered or available to them while at camp which is not otherwise held at school, including prescribed or over the counter daily medications taken outside of school hours, or "in-case" medications such as pain relief, hayfever or allergy relief, eczema or skin creams please follow these steps to be completed **a minimum of 2 school days prior to camp departure date:**

1. Complete a [Medication Authorisation and Administration Record](#) for each medication.
2. Provide an adequate supply of all medications.
 - a. Medication must be in original packaging, labelled with your child's full name, correct dose and time to be administered.
3. **Medication Authorisation and Administration Record and medications must be completed handed to the school front office staff a minimum of 2 school days prior to departure date for this camp. Thursday 14 March 2024.**

Please do not hesitate to contact the school on 6142 2400 if you have any questions or would like assistance regarding medication and medical requirements for your child.

Chapman Primary School Camp Permission Form

YEAR 6 CAMP BORAMBOLA SPORT AND RECREATION CENTER

This signed permission form and minimum deposit must be returned to your child's classroom teacher no later than **Wednesday 7 February 2024.**

I give permission for my child _____ in class _____ to attend the year 6 camp to Borambola Sport and Recreation Centre from Monday 18 March travelling by bus.

☐ I have / will complete the [Borambola Camp Online Registration](#) by Monday 26 February

I agree to my child participating in the activities associated with this camp mentioned previously. I have discussed with my child the need for expected behaviour on this excursion. I authorise the school to make arrangements for the welfare of my child (including medical or surgical treatment) in an emergency and I agree to meet the associated costs. I have provided to the school all medical information relevant to my child attending this camp.

I agree that my child will be under the authority of the school for the duration of the camp and that the school is authorised to return my child to school or home at my expense if the school considers that circumstances warrant such action. I give permission for my child to travel by private car, driven by a staff member or parent, in an emergency.

Behavioural Expectations

☐ I have discussed the expected behavioural expectations with my child and understand that failure to follow these expectations may result in me being called to collect my child from the camp.

Swimming and Water Park Aquatic Activities

- ☐ I agree to my child participating in supervised time in the Borambola Pool under the supervision of Chapman Primary School qualified staff.
- ☐ I have discussed with my child the need for sensible behaviour during this time and acknowledge that if they act inappropriately they will be asked to get out of the pool immediately.
- ☐ I authorise the school to make arrangements for the welfare of my child (including medical or surgical treatment) in an emergency and I agree to meet the associated costs.

My child can swim: Yes ☐ No ☐

Distance my child can confidently swim: 10m ☐

25m ☐

50m ☐

100m ☐

Medical Information

☐ I have completed and returned the ACT Education Medical Information Consent Form with this permission. *The Medical Information and consent form only needs to be completed once per calendar year prior to the first excursion unless there are changes to the details on this form.*

Will your child require medication to be administered at camp? Yes ☐ No ☐

- **If yes**, is this medication and accompanying plans held at the school? Yes ☐ No ☐
- **If No**, a [Medication Authorisation and Administration Record](#) for each medication must be completed and presented to the school front office together with medication by 3.00 pm on Thursday 14 March 2024. *Please contact the school front office on 6142 2400 to put these arrangements in place.*

☐ **I understand I must present the required medical forms and medication to the school by 3.00 pm on Thursday 14 March 2024.**

All Medical Plans and Medications held at the school will be taken to camp.

Is there any additional information you need to provide to support your child's participation in this excursion?

Yes ☐ No ☐ (If yes, please provide these details below.)

Please provide the following information:

Medicare No:		Private Health Fund:		Membership No:	
Ambulance fund: Parents are responsible for ambulance costs outside the ACT					

Dietary Requirements

- ☐ My child does not have special dietary requirements.
- ☐ My child has the following Dietary requirements due to food allergies, cultural and/or religious reasons.

Name of Parent/Carer (please print): _____

Signature: _____ **Date:** _____

If you fill in this form, your personal information and that of your child will be collected and handled by the ACT Education Directorate (EDU) This information is necessary for us to manage student participation in excursions and support the welfare and safety of your child. If you do not consent to supply us with this information your child will be unable to participate in the excursion. Normally, we will not use or disclose this information for another purpose, without your consent, unless you would reasonably expect us to use or disclose the information for a related purpose. Normally we only share information with school staff and, where necessary, parents or volunteers assisting with the excursion to appropriately and effectively manage the excursion. The Directorate has a privacy policy that explains how we handle personal information, including how we handle privacy complaints. The policy is available on the Directorate's website (www.det.act.gov.au) on the About Us page.

Forms to be returned with this permission:

- ☐ **Medical information and consent form**

Payment Code: Yr6Camp

Camp Payment Form

YEAR 6 CAMP BORAMBOLA SPORT AND RECREATION CENTRE

Child's name: _____ Class: _____

☐ I have enclosed the full cost of \$395 for the camp.

OR

☐ I have enclosed \$135 (Deposit) for the camp to secure my child's place **by Monday 12 February 2024**.

☐ I understand the balance of \$260 will be made **no later** than **Monday 11 March 2024**.

Suggested Payment Plan		
Payment	Cost	Due Date
Deposit	\$130	Monday 12 February 2024
Payment 2	\$130	Monday 26 February 2024
Final Payment	\$135	Monday 11 March 2024

☐ Quickweb payment of \$_____ made on (date)_____ receipt number _____
<https://www.chapmanps.act.edu.au/payment>

☐ Enclosed is cash to the value of \$_____

☐ Credit Card as per attached slip– add credit card slip.

Please ensure Parent permission and Medical form are returned to your child's teacher.

Credit Card Payment Slip

Amount: \$_____

Credit Card Facility (Please tick which card applies)

Master Card ☐ Visa Card ☐

Card No.

Expiry Date: __ __ / __ __

Name on card: _____

Cardholders Signature: _____ Date: _____

Contact Phone Number: __ __ __ __ __ __ __ __ __

This information is securely disposed of when your payment has been processed.