



HARTWELL PRIMARY SCHOOL 4055

28th February, 2019

Dear Parents,

The Grade 3 and 4 children will be attending the CYC Phillip Island Camp in Term 2.

Year 3 Camp is from Wednesday 1st May to Friday 3rd May 2019.

Year 4 Camp is from Monday 29th April to Wednesday 1st May 2019.

Could you please read the attached notes carefully, fill in the information and return them with your confirming deposit to your child's teacher no later than Friday 15th March 2019.

The cost of this camp will be \$280 which covers entry to the Penguin Parade, transport, ranger talk, accommodation and meals.

Please see payment options attached.

CLOTHING

You will find a clothing list enclosed with this information, outlining your child's requirements for this three day camp. This is to help you plan for the camp.

Would you please ensure that all pieces of clothing are clearly labelled as we find very few children claim their lost property at the completion of each camp.

A soft bag is requested for taking clothes to camp.

MEDICAL FORMS

Can you please fill out the attached medical form and return this to your child's teacher by Friday 15th March 2019.

PAYMENT

METHOD 1:	Deposit of \$100.00	by Friday 15 th March 2019
	Balance of \$180.00	by Thursday 4 th April 2019

METHOD 2:	Payment in full \$280	by Friday 15 th March 2019
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Please complete the payment and camp permission using the Qkr App. If you require any assistance with the app please contact the school office.

**KRIS MOORE
Principal**

HARTWELL PRIMARY SCHOOL

YEAR 3 and 4 CAMP

CLOTHING REQUIREMENTS

Sun hat, Block out cream and insect repellent cream (not a spray) are essential.

- Sleeping bag
- Pillowcase
- Shoes/ or runners for walking
- Old runners (to wear in case other pair becomes wet)
- Thongs (for showers)
- Jumpers
- **Parka or warm jacket– definite must Penguin Parade**
- Raincoat – Penguin Parade
- Hat, beanie – Penguin Parade
- Pyjamas
- Jeans, shorts
- T shirts
- Long sleeved cotton shirt
- Socks and underwear for three days
- Tracksuit
- Face washer, soap, toothbrush, comb, brush, towel
- Torch
- Plastic bag for dirty clothes

HARTWELL PRIMARY SCHOOL. NO. 4055

CONFIDENTIAL MEDICAL REPORT

(Please complete BOTH pages and return these by the Friday 15th March 2019)

This report is intended to assist the school in case of any medical emergency with your child.

Child's name: Date of Birth:

Parent's/Guardian's Full Name:

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Address:

Parent/Guardian: Telephone: After hours:

Business hours: Mobile:

Emergency Contact: (not parent):

Telephone: After hours:

Business hours: Mobile:

Name and Address of Family Doctor:

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Medicare Number: Ambulance Subscriber: YES / NO

Medical/Hospital Insurance Fund:

Contribution Number:

Please tick if your child suffers any of the following:-

- | | | | |
|--|---|--|-----------------------------------|
| <input type="checkbox"/> Diabetes | <input type="checkbox"/> Fits of any type | <input type="checkbox"/> Heart condition | <input type="checkbox"/> |
| <input type="checkbox"/> Asthma | | | |
| <input type="checkbox"/> Dizzy spells | <input type="checkbox"/> Sleepwalking | <input type="checkbox"/> Blackouts | <input type="checkbox"/> Migraine |
| <input type="checkbox"/> Travel Sickness | <input type="checkbox"/> Other (specify) | | |

Allergies to:

- | | | |
|---|------------------------------------|--------------------------------------|
| <input type="checkbox"/> Penicillin | <input type="checkbox"/> Any foods | <input type="checkbox"/> Other drugs |
| <input type="checkbox"/> Other allergies (specify)..... | | |

What special care is recommended:

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Special Dietary Requirements:

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.....

Tetanus Immunisation

Last tetanus immunisation was

If over ten years since last immunisation, please tick if booster is to be arranged by parents before the camp []

Booster date

Tablets and Medicines

Is your child presently taking tablets and/or medicine? YES / NO

If YES please state name of medication:

.....

All medicines must be handed to the First Aid Teacher prior to leaving, with your child's name, the dose to be taken and when it should be taken. (These will be kept in the first aid centre and distributed as required). **A form for specific medication details will be provided before camp. Please do not allow children to be in possession of any medicine or first aid equipment while on the camp. This includes band-aids and panadol.**

Contagious Illnesses

Has your child had contact with anybody with a contagious illness in the last two weeks.

YES / NO

***NB:** A YES answer does not mean the child cannot attend camp. This information could be useful if your child becomes ill.

Consent to Medical Attention

I authorise the teacher in charge of the camp to consent, where it is impracticable to communicate with me, to the child receiving such medical or surgical treatment as may be deemed necessary.

Signed: **Date:**

Parent / Guardian

General:

Please feel free to add any further details below:

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