February 2016

Huntingtower School Camp

Dear Parents/Guardians

**Excursion to:** Forrest

**Activity:** Mountain Bike Riding and Surfing

**Date:** 22 - 26 February, 2016

**Accommodation:** Tents – camping at Forrest Caravan Park

**Departure Time:** Arrive at 7.00am for 7.30am departure

**Return Time:** 4.30pm

**Clothing:** Please use clothing/equipment list in the student information book (your child/children will receive this soon)

**Meal Arrangements:** A packed lunch for day 1 is required. All other meals will be provided

**Cost:** Camp cost are covered in the student fees

**Special Requirements:** It is highly recommended that all students have ambulance cover due to the activity and location.

**Emergency contacts:** Huntingtower School: 9807 8888

Mr Noel Davies: 0423 600 504

*While outside students should wear sunscreen and protective clothing to ensure adequate sun protection.*

*All forms should be returned by Monday 8 February - Students cannot board the bus without updated inline medical information and a completed consent form.*

Yours Sincerely

Nicholas Green
Camps Co-ordinator
PERMISSION FORM

Please return this form to the School by the 8 February 2016

Year 10 Camp - Forrest
22 - 26 February, 2016

I give permission for my son/daughter _____________________________ to attend the Year 10 Mountain Bike camp to Forrest, as set on the attached sheet.

In the event of illness or injury to my child whilst at school, on an excursion, or travelling to or from school; I authorise the Principal or teacher in charge of my child, where the Principal or teacher in charge is unable to contact me, or if it is otherwise impracticable to contact me to:

- Administer such first aid as the Principal or staff member may judge to be reasonably necessary.
- Consent to my child receiving such medical or surgical attention as may be deemed necessary by a medical practitioner.
- Consent to and understand that I will be responsible for any costs incurred if an ambulance needs to be called.
- Due to organisational requirements, I understand that if this form and payment (if required) are not returned by the due date my child will not be able to attend the above activity. Parents/Guardians are welcome to contact the class teacher and make other arrangements if unable to have the forms/money returned by the due date.

Parent/guardian: _______________________________ (full name)

____________________________ (signature) ___________ (date)

In case of emergency I can be contacted on:

__________________________ OR:

__________________________