



8 November 2018

YEAR 7 CAMP 2019

Dear Parent / Carer

Your child has been selected to attend the 2018 Year 7 Orientation Camp as a Student Leader. The camp will run from **Monday February 25 to Thursday February 28**.

Students will attend the Sports Super Centre at Runaway Bay centre on the Gold Coast for a four day camp. Runaway Bay Sport and Leadership Excellence Centre is a multi-purpose venue that caters for diverse groups ranging from school groups in primary and secondary settings through to athletes and performers preparing for prestigious international events. This centre was one of the key venues for athletes for the 2018 Commonwealth Games held on the Gold Coast and as such the facility has had millions of dollars worth of upgrades in recent times.

As this camp takes place in the fifth week of Term 1, we would like to advise parents now to enable necessary planning on both your and our behalf to begin.

The proposed programme includes diverse activities such as sailing, archery, SUPing, cycling, surf safety, beach activities and naturally a range of team building, initiative challenges and leadership activities. Members of staff attending the camp are suitably qualified, many of them having previously been on our orientation camps and they will work with our students alongside the staff from the Excellence Centre. **Teachers are very enthusiastic about the potential it offers for your child's personal development and student-teacher interaction.**

We can promise you that your son/daughter will have a rewarding, interesting, adventurous and somewhat exhausting 4 days.

In preparation for the camp, student leaders are required to attend a training and preparation day, to be held at the school, out of normal school hours.

Before payment for the 2019 Camp is accepted you are required to have already submitted a signed Student Resource Scheme (SRS) participation form together with either:

- full payment of the Student Resource Scheme (SRS), **OR**
- \$100 entry fee in addition to:
 - a signed school pay off agreement stipulating regular repayments (eg. Centrepay deduction, debit/credit card, bank transfer)

**ADDITIONALLY, FULL PAYMENT FOR CAMP IS TO BE RECEIVED
NO LATER THAN
9.00am FRIDAY 1 FEBRUARY 2019**



Details of the Camp:

- It is anticipated that students will be required to arrive at school at 8:00am on Monday February 25 for an 8:45am departure, and return at 4.30pm on Thursday February 28 2019. Students will be given the option to remain at home on Friday March 1, as from past experience most students need time after camp to recharge their batteries from the energetic experiences they undertake during the camp program. Naturally, students may still attend school on Friday March 1 where they will be offered an alternative education program for the day.
- The **total cost** (including all accommodation, transport, equipment hire, personnel hire for various specialist pursuits (to meet Workplace Health and Safety requirements), and all meals is **\$280.00**. As there is no canteen, no pocket money is required!
- **FULL PAYMENT TO BE RECEIVED by 9.00am FRIDAY FEBRUARY 1 2019** (all payments at CHSHS are made at the school Textbook Office which is located under B Block, next to the Tuckshop)
- Method of payment - Cash, Credit/Debit Card, EFT, Cheque (*made payable to CHSHS*).
- **The attached consent forms are to be returned fully completed at time of payment.**
- Details with regard to camp requirements (e.g. clothing and equipment) will be issued in either the second or third weeks of the 2019 school year.
- If you would like to obtain additional information in regard to any aspect of the camp, please feel free to contact us on 46367500.

Yours sincerely

Dave McMillan
Camp Co-ordinator

Maryanne Walsh
Principal



CONSENT FORM: Year 7 Camp Leader

Activity Risks & Insurance

Please note that the Department of Education and Training does not have personal accident insurance cover for students. If your child is injured as a result of an accident or incident while participating in the activity, 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 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.

- I hereby give permission for my child to attend the **Year 7 2019 Orientation Camp at Sports Super Centre, Runaway Bay on Monday February 25 to Thursday February 28 2019** as per conditions of the letter attached and agree to delegate my authority to the teachers involved. Such teachers may take whatever disciplinary action they may deem necessary to ensure the safety, well-being and successful conduct of the students as a group, or individually, in the above-mentioned activity.
- I also authorise the teachers to obtain medical assistance which they deem necessary should an accident occur, and agree to pay all medical expenses incurred on behalf of the below student. With regard to an International student living in a homestay situation any medical costs will be covered by the student or natural parent.
- 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 and Training does not have personal accident insurance cover for students.

Student Name: _____ PCG: _____

Parent/Carer Name: _____

Parent/Carer Contact Details: _____

Additional Emergency Contact: _____

Medical conditions to be aware of: _____

Parent/Carer Signature: _____ Date: ___/___/___

PAYMENT FOR: **Year 7 2019 Orientation Camp**

TEACHER: _____

METHOD OF PAYMENT: \$280

CASH PAYMENT FOR: \$ _____

CHEQUE PAYMENT FOR: \$ _____ (MAKE CHEQUE PAYABLE TO CHSHS)

I hereby authorise Centenary Heights State High School to debit my: **Visa**  **MasterCard** 

_____|_____|_____|_____|_____|_____|_____|_____| EXPIRY: ___/___ AMOUNT \$ _____

CARDHOLDERS NAME (as it appears on the card): _____

SIGNATURE OF CARDHOLDER: _____ DATE: ___/___/___