

7th May, 2021

Year 6 Camp: Canberra and the Snowy Mountains

Dear Parents/Carers,

During August, we are taking our Year 6 students on the annual three day excursion to Canberra and the Snowy Mountains.

Depart for Canberra:	Monday 2 nd August, 2021 (Term 3, Week 4) Students to arrive at school by 6:20am – assemble in school hall
Return to Kings Langley:	Wednesday 4 th August, 2021 (Term 3, Week 4) Approximate arrival time back at school is 4:45pm – Parents/carers to collect children from the bus bay near the front gate.
Accommodation:	Gold Creek Tourist Resort, O'Hanlon Place, Nicholls (Canberra)
Venues/Sights Include:	War Memorial, Parliament House, Australian Institute of Sport, Telstra Tower, Royal Australian Mint, Old Parliament House, Questacon, Perisher (To be confirmed)

Please note: All bookings are subject to COVID-19 restrictions in place at the time. Venues are constantly reviewing their COVID-19 safety guidelines and the school will comply with all health and safety requirements imposed by each venue. Perisher are currently reviewing student group bookings. We will confirm the itinerary when this is finalised.

Organising Teacher:	Mrs Kathryn Lee (Stage 3 Assistant Principal)
Total Cost:	\$390 This includes travel, accommodation, most meals, snow gear hire and activities. It also includes the Australian Government PACER rebate and additional costs subsidised by the school.

Please note: Students will need to provide morning tea, afternoon tea and lunch for day 1.

Payment schedule:	Deposit of \$100 to be paid by Wednesday 2 nd June, 2021.
	Payment in full due by Thursday 15th July, 2021.

In this information pack, you have received:

- Parent/Emergency contact details note
- Paracetamol/Ibuprofen permission note
- Dietary requirements note
- Medical information note

Please return the notes listed above to your child's classroom teacher by Wednesday 2nd June, 2021.



The finalised itinerary and list of requirements needed for the trip will be communicated to all parents/carers in the next few weeks.

Aims of the Excursion:

- 1. To provide practical reinforcement for our Year 6 students' studies in democracy and government by giving students the opportunity to visit significant places in Canberra and experience first-hand the institutions involved in our political process.
- 2. To provide students with an opportunity to experience a stay away from home.
- 3. To enable the students to work cooperatively with their peers in a social, caring environment.

Kind regards,

Mrs Kathryn Lee (Assistant Principal)

Mr Chris Lambert (Principal)

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Year 6 Camp: Canberra and the Snowy Mountains

Deposit of \$100 – Due Wednesday 2nd June 2021

Please return to: School Office

I hereby give permission for my child

of class ______ to attend the Year 6 Canberra/Snowy Mountains excursion from Monday 2nd August to Wednesday 4th August, 2021. I understand that \$100 deposit is due by Wednesday 2nd June, 2021. I also confirm that I will complete the full payment (\$390) by Thursday 15th July, 2021.

Please note that in the event of your child being unable to attend the excursion, refunds cannot be given. Credit will be applied to a student's account for costs that can be recovered by the school.

П \$100 cash deposit is enclosed

 \Box Payment has been made by Direct Deposit Receipt No.: ______

Name	of	Parent/	Carer:	
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Signature of Parent/Carer: _____ Date: _____ Date: _____



KINGS LANGLEY PUBLIC SCHOOL

Year 6 Camp: Parent/Carer and Emergency Contact Details

Due Wednesday 2nd June, 2021 to your child's classroom teacher

I understand that my child will leave from Kings Langley Public School on the morning of Monday 2nd August, 2021 and that the planned return is the evening of Wednesday 4th August, 2021. I also understand that my child will be under the supervision of teaching staff from Kings Langley Public School.

In the event of any accident or illness, I authorise teaching staff obtaining, on my behalf, any medical assistance that my child may require. I also undertake to pay medical fees and/or costs of drugs which may be incurred.

Name of Parent/Carer:		
Signature of Parent/Carer:		Date:
Parent/Carer Contact Details		
Parent/Carer 1		
Name:		
Home phone:	_ Mobile:	Work:
Parent/Carer 2		
Name:		
Home phone:	_Mobile:	Work:
Emergency Contact Details		
Emergency Contact 1:		
Name:		
Home phone:	_Mobile:	Work:
Emergency Contact 2:		
Name:		
Home phone:	_Mobile:	Work:



Year 6 Camp: Paracetamol/Ibuprofen Permission Note

Due Wednesday 2nd June, 2021 to your child's classroom teacher

Dear Parents/Carers,

You will find below a permission slip for the administration of pain relief, including paracetamol (Panadol) and ibuprofen (Nurofen) should your child require it whilst on the Year 6 Canberra excursion from Monday 2nd August, 2021 to Wednesday 4th August, 2021.

Kind regards,

Kathryn Lee Stage 3 Assistant Principal

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Year 6 Camp: Paracetamol/Ibuprofen Permission Note

Due Wednesday 2nd June, 2021 to your child's classroom teacher

□ I give permission

I do <u>not</u> give permission

for	my	child		of	class		to	be	admir	nistered
para	iceta	mol or	ibuprofen if they require it on the Year 6	Canl	berra e	xcursion fro	m N	/lone	day 2 nd	August
to W	/edn	esday 4	4 th August, 2021.							

Name of Parent/Carer:	

Signature of Parent/Carer: ______

Date:			



Year 6 Camp: Dietary Requirements

Due Wednesday 2nd June, 2021 to your child's classroom teacher

Dear Parents/Carers,

We realise some children may have special dietary requirements. Most dietary requirements can be catered for if we provide details prior to the excursion. Please be aware that the term "dietary requirements" does not include foods your child does not like eating. They are to cater specifically for children with needs such as; vegetarian, halal, allergic reactions, lactose, wheat, gluten, dairy or seafood intolerances.

Thank you for your support,

Kathryn Lee Stage 3 Assistant Principal

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Year 6 Camp: Dietary Requirements

Due Wednesday 2nd June, 2021 to your child's classroom teacher

My child		of class _	
has special dietary	requirements:		
	T YES	□ NO	
If you have ticked 'YES', ple	ase briefly describe your child'	s dietary requirements:	

Name of Parent/Carer: ______

Signature of Parent/Carer: _____

Date: _____



KINGS LANGLEY PUBLIC SCHOOL

ENDEAVOUR TO BE A RESPECTFUL, RESILIENT LEARNER

Year 6 Camp: Medical Information (Page 1 of 2)

Due Wednesday 2nd June, 2021 to your child's classroom teacher

It is important that all sections below are completed and details of	any medication that your child takes are provided.
If your child takes any medication regularly (asthma, allergies, med the excursion will need to be handed in to the school office by Thu original packaging and clearly labelled with your child's name.	· · · · · · · · · · · · · · · · · · ·
Family Information	
Student name: Dat	e of birth:
Address:	Postcode:
Parent/Carer full name:	
Phone: (Home) (Work)	(Mobile)
Health Care Information	
Medicare number:	Expiry date:
Student reference number on card:	
Private Health Fund name:	
Health Fund membership number:	
Doctor's name:	
Doctor's phone number:	
Does your child have a medical condition? (Asthma, diabetes, epile require a health care plan from a health care specialist.	epsy). Please note, any medical conditions
Does your child have any allergies to common foods, insects, plant	
Is your child's immunization up to date, including tetanus?	
If yes, what year was the last booster given?	



KINGS LANGLEY PUBLIC SCHOOL

ENDEAVOUR TO BE A RESPECTFUL, RESILIENT LEARNER

Year 6 Camp: Medical Information (Page 2 of 2)

Due Wednesday 2nd June, 2021 to your child's classroom teacher

Does your child wet the bed? _____

Does your child sleepwalk? _____

Does your child suffer from travel sickness?

If so, do they require medication for travel sickness? (Please detail and include in medication requirements table below for the return journey. Medication should be administered by parents prior to departure).

Medication

Does your child require any regular medication? YES / NO

(If yes, please detail below. Sufficient medication for the length of the excursion should be supplied in original, labelled packaging to the school by Thursday 29th July, 2021).

Time and dosage:

	Brea	kfast	Lur	nch	Din	ner	Otl	ner
Medication name	Time	Dose	Time	Dose	Time	Dose	Time	Dose

Permission

I hereby consent to the staff at Kings Langley Public School administering the medication supplied.

Name of Parent/Carer: _____

Signature of Parent/Carer: Date:

Privacy information This information is being obtained for the purpose of ascertaining relevant medical information, requirements and other health care related needs for your child while attending the 2021 Canberra school excursion with Kings Langley Public School. It will be used by officers of the NSW Department of Education to assist planning, to support students and to minimise risks on the excursion. Other persons or agencies that may be provided with this information include, but are not limited to, volunteers and members of external organisations who join with the school or are otherwise involved in the planning or delivery of the excursion. Provision of this information is not required by law. However, a failure to provide the information may mean that your child cannot participate in this excursion. Provision of this information will significantly assist the school in planning a safer educational activity. It will be stored securely. If you have any concerns about provision of this information, please contact the school principal to discuss further.