Year 5 & 6 Camp Allambee
16 – 20 March 2015

16 February 2015

Dear Parents/Guardians,

We are pleased to confirm your child’s place at our 2015 Year 5/6 Camp Allambee. Planning is well underway, and it’s shaping up to be a fantastic week for us in West Gippsland!

CAMP INFORMATION:
Some important information regarding the camp is listed on the back on this page. Please read this information and contact the school prior to our camp departure if you have any queries.

FORMS:
All students attending camp must return a consent form and a medical form, both signed by a parent/guardian. All forms are attached to this letter. Students with asthma must also complete an Asthma Management Form. Please contact the office if you require an asthma form and it is not attached. Please return all consent forms and medical forms to school by Monday 2nd March 2015.

PAYMENTS:
Thank you for continuing to forward your payments for camp. Please contact the office if you have any queries regarding payments. A copy of the original camp notice and payment slips is on the LWPS website. The total cost of $370 must be paid in full by Monday 2nd March 2015 in order for your child to attend camp. Children will not be able to attend camp if full payment has not been received.

TRAVEL DETAILS:
Departure:
9:00am, Monday 16th March 2015. Carol Watt room entrance (Bowen Road).
Please arrive no earlier than 8:40am.

Return:
3:15pm, Friday 20th March 2015. Carol Watt room entrance (Bowen Road).
A Tiqbiz message will be sent out on the Friday afternoon with a more accurate estimated arrival time.

PACKING LIST:
A packing list is attached for your information. Please note: NO TECHNOLOGY DEVICES are permitted.

MEDICATION:
Specific information about the handling of medication will be provided in the week prior to camp.

Kind regards

Mrs Wendy Bartsch
Year 5/6 Teachers
Principal
2015 Year 5/6 Camp Allambee
Information for parents

Please keep this page for your information

Educational purpose of the program:
To provide unique personal development experiences through outdoor education and community living.

Details of supervising staff:
Teacher-in-charge: Mrs Anita Elliott (Assistant Principal).
Students will be accompanied by their classroom teachers and a number of specialist and support staff.

Name and contact details of the 24-hour school emergency contact:
Mrs Anita Elliott: 0427 085 141 (school mobile)

Departure details:
Lilydale West Primary School: 9:00am Monday 16th March 2015

Return details:
Lilydale West Primary School: 3:15pm Friday 20th March 2015

Distance from expert medical care:
West Gippsland Hospital (Warragul): 27 kilometres

Accommodation arrangements:
Separate male and female dormitories and cabins with ensuite bathrooms.

Travel arrangements:
McKenzie’s Bus Tourist Services

Adventure activities to be undertaken or that may be offered to students throughout the program:
Students will be offered a variety of indoor and outdoor adventure camp activities. More information is available at www.allambeecamp.com

Risk Management procedures:
• Allambee Camp follows the Adventure Activity Standards (AAS) published by the Outdoor Recreation Centre Inc. (ORC) supported by the Victorian Outdoor Industry and the Victorian State Government.
• A Risk Management Information Plan and Emergency Response Plan have been developed by Camp Allambee.
• A Risk Management Plan for this camp has been developed by Lilydale West Primary School staff.
• There will be a 1:10 ratio of staff to students at the camp, and at least one staff member present at all times with every group at every activity.

For more information about Camp Allambee, please visit their website: www.allambeecamp.com
2015 Year 5/6 Camp Allambee
Packing List

Please keep this page for your information

All clothing, bags, and personal items must be clearly named!

SLEEPING/TOILETRIES:

Sleeping bag
Fitted sheet for single bed
Pillow case (one pillow is provided)
Students may bring their own pillow or ‘Pillow Pet’ if desired.
Pyjamas
Towel
Thongs (for showering only)
Toilet articles:
  Soap, toothbrush & toothpaste, shampoo, comb or hairbrush, hair ties.

Long hair must be tied back. Bring plenty of hair ties.

Plastic bag for dirty clothes
Medication if required
(Must be handed to teacher on arrival at school)

*For bed wetters, a waterproof mattress cover sheet & extra pyjamas are needed. The camp does have some plastic sheets in case of need.

CLOTHING:

6 x pairs of socks
6 x underwear
5 x t-shirts (no singlets – all tops must have sleeves)
At least 1 x long-sleeve shirt or top
2 x warm jumpers
2 x shorts (No ‘short’ shorts allowed. Knee-length shorts or long pants must be worn for activities with harnesses.)
2 x jeans, long pants or tracksuit pants
1 x waterproof jacket or rain coat

FOOTWEAR:

2 x sturdy pairs of shoes/boots (one pair for dirty/muddy activities, one pair for clean activities.
Students MUST wear fully-enclosed, lace-up shoes or boots for all activities.)
Slippers (suggested)
(We have a “shoes off” policy inside buildings.)

OUTDOORS:

Wide-brim or bucket sun hat
Sunglasses (optional)
Refillable water bottle
Sun screen & lip balm
Torch

THINGS TO DO (suggested):

Camera
Book to read
Small pencil case and drawing pad
Small card games

What NOT to bring:

• Some visitors are anaphylactic to nuts, so please do not bring any NUTS or NUT PRODUCTS to our camp.
• Please do not bring any VALUABLES, as we do not have any lockers or a safe. Allambee Camp cannot be held responsible for any theft, damage or loss of any valuables brought to camp.
• Do not bring MOBILE PHONES or ELECTRONIC DEVICES. Unplugging helps students to develop social skills and improve relationships.
• No aerosol propellant cans, e.g. deodorant sprays or insect repellent sprays. Choose roll-on or creams instead.
2015 Year 5/6 Camp Allambee
Medical Form: double-sided

Return to school by Monday 2\textsuperscript{nd} March 2015

The school will use this information if your child is involved in a medical emergency. All information is held in confidence. This medical form must be current when the excursion/program is run.

Parents are responsible for all medical costs if a student is injured on a school approved excursion unless the Department of Education is found liable (liability is not automatic). Parents can purchase student accident insurance cover from a commercial insurer if they wish to.

Excursion/program name: Year 5/6 Camp Allambee
Date(s): Monday 16 March 2015 – Friday 20 March 2015

Student’s full name:

Student’s address: Postcode:

Date of birth: Year level:

Parent/guardian’s full name:

Name of person to contact in an emergency (if different from the parent/guardian):

Emergency telephone numbers: After hours Business hours

Name of family doctor:

Address of family doctor:

Medicare number:

Medical/hospital insurance fund: Member number:

Ambulance subscriber? □ Yes □ No If yes, ambulance number:

Is this the first time your child has been away from home? □ Yes □ No

Please tick if your child suffers any of the following:

□ Asthma (if ticked complete Asthma Management Plan) □ Bed wetting □ Blackouts
□ Diabetes □ Dizzy spells □ Heart condition □ Migraine
□ Sleepwalking □ Travel sickness □ Fits of any type

□ Other: ________________________________

(please turn over)
**Allergies**
*Please tick if your child is allergic to any of the following:*

- □ Penicillin
- □ Other Drugs: ____________________________

- □ Foods: ____________________________

- □ Other allergies: ____________________________

What special care is recommended for these allergies? ____________________________

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**Year of last tetanus immunisation:**

(Tetanus immunisation is normally given at five years of age (as Triple Antigen or CDT) and at fifteen years of age (as ADT))

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**Medication**

Is your child taking any medicine(s)? □ Yes □ No

*This includes the use of asthma puffers, creams/lotions and non-prescription medicines.

*Please note: teachers are not able to administer any medication other than that which has been provided by you.

If yes, provide the name of medication, dose and describe when and how it is to be taken.

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**PLEASE NOTE:**

All medication must be given to the teacher-in-charge. All containers must be labelled with your child’s name, the dose to be taken as well as when and how it should be taken. The medications will be kept by the staff and distributed as required. Inform the teacher-in-charge if it is necessary or appropriate for your child to carry their medication (for example, asthma puffers or insulin for diabetes). A child can only carry medication with the knowledge and approval of both the teacher-in-charge and yourself.

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**Medical consent**

Where the teacher-in-charge of the excursion is unable to contact me, or it is otherwise impracticable to contact me, I authorise the teacher-in-charge to:

- Consent to my child receiving any medical or surgical attention deemed necessary by a medical practitioner.
- Administer such first-aid as the teacher-in-charge judges to be reasonably necessary.

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Signature of parent/guardian (named above) ____________________________

Date: ____________________________

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The Department of Education and Early Childhood Development requires this consent to be signed for all students who attend government school excursions that are approved by the school council.

**Note:** You should receive detailed information about the excursion/program prior to your child’s participation and a Parent Consent form. If you have further questions, contact the school before the program starts.
2015 Year 5/6 Camp Allambee
Parent Consent Form

Return to school by Monday 2nd March 2015

Please read and discuss the following information with your child:

Camp information
Specific information about the camp has been provided as an attachment.

Student behaviour
'I understand that in the event of my son’s/daughter’s misbehaviour or behaviour that poses a danger to himself/herself or others during the excursion, he/she may be sent home. I further understand that in such circumstances I will be informed and that any costs associated with his/her return will be my responsibility.'

Photograph consent
'I consent to my child being photographed and/or visual images of my child being taken during activities by the school for use in the school’s publications, school’s website or for publicity purposes without acknowledgment and without being entitled to any remuneration or compensation.' [Strike out if you do not consent]

Consent for emergency transportation
‘In the event of an emergency I consent to my child being transported in a privately owned vehicle driven by a member of the supervisory staff.’

Student accident insurance
The Department of Education does not provide student accident cover. Parents may wish to obtain student accident insurance cover from a commercial insurer, depending on their health insurance arrangements and any other personal considerations.

Parent consent
I have read all of the above information provided by the school in relation to the 2015 Year 5/6 Camp Allambee, including any attached material.

I give permission for my daughter/son __________________________ (full name) to attend.

Parent/guardian: __________________________ (full name)

____________________________________ (signature) ____________ (date)

In case of emergency I can be contacted on:
________________________________________ OR:
________________________________________