



Westbourne Park Primary School

2 Marlborough Road,
Westbourne Park 5041
EMAIL: dl.0475_info@schools.sa.edu.au
WEBSITE: wbourneps.sa.edu.au

TELEPHONE: (08) 8271 7430
FAX: (08) 8373 3057

Dear Parents,

Planning is well underway for our camp to Nannu Farm from Wednesday 2nd July-Friday 23rd July, travelling with Link SA.

The activities students will take part in at Nannu Farm include:

- Vintage truck farm tour
- Chicken hatchery
- Animal feeding
- Hand ploughing
- Farm history trail
- Blacksmith demonstration
- Butter making
- Horse riding

(An explanation of these activities is on the Nannu Farm website www.nannufarm.com.au)

We were overwhelmed with the number of parents who showed interest in joining us, however we could only pick five volunteer helpers. Therefore, the five parent volunteers are: Tony Vroulis, Emma Jacka, Jo McKay, Tanya Rundle and Ally Bain.

Attached to this cover letter is your invoice with a costing breakdown (the total cost is \$230.00) and a consent and medical information form.

Could you please return all forms, with payment, by the last day of Week 9 (Friday 25th June) as we need to confirm numbers and give all necessary details to Nannu Farm by the end of term. If payment has not been made by the due date, we'll assume your child won't be going on camp and arrange for them to go to another class for the 3 days.

If you need to ask us any questions regarding our camp, please do not hesitate in contacting us via email or seeing us at school.

We are looking forward to a great camp and the social and educational opportunities students will experience. Towards the end of term we will send home more information about what to bring and any other details you need to know.

Kind Regards,

Karen Lydeamore, Christina Stevens and Charlotte Beecken



CONSENT FORM FOR CAMP, EXCURSION, SPORTING OR ADVENTURE ACTIVITY

(Note: that parents includes independent students, see definitions of the camps and excursions procedure)

Requirements in this document must not be altered. Please use block letters when filling out this form

As a parent of:

STUDENT/CHILD'S NAME

I:
PARENT NAME

give my consent for [name of child] to participate in:

NAME OF CAMP/EXCURSION/SPORTING OR ADVENTURE ACTIVITY: LC3, LC4 and J4 Narnu Farm Camp

do not give my consent for [name of child] to participate in any religious activities outlined below (if applicable)

LOCATION: Narnu Farm, Hindmarsh Island

FROM: 2 1 0 7 2 1 TO: 2 3 0 7 2 1 OR ON: [] [] []

Does your child have any health support, or medication administration needs that should be considered for camps, excursions etc? Yes No N/A

If Yes, has a care plan/medication agreement been provided to the school/preschool? Yes No N/A

If No, please provide a completed care plan/medication agreement to the school/preschool on completion of this form.

Any other matters that may impact your child's participation in the above activities safely? Yes No

If Yes, please outline details to the school/preschool in the box below.

[Empty box for additional details]

Details of planned activities, transport arrangements, anticipated number of students/children and supervising teachers/instructors are provided on the information sheet below.

Agreement

- I agree to delegate my authority to supervising teachers/instructors. Such supervisors may take whatever disciplinary action they deem necessary to ensure the safety, well-being and successful conduct of the students as a group and individually.
- In the event of an accident or illness and contact with me being impracticable or impossible, I authorise the teacher-in-charge to arrange whatever medical or surgical treatment a registered medical practitioner considers necessary. I will pay all medical and dental expenses incurred on behalf of my child. I understand that I may seek payment of any ambulance invoice by the department if my child does not have private ambulance cover.
- Where appropriate I have also attached additional or updated health care information, including details of any additional health support he/she requires to undertake the above activities safely.
- The information given is accurate to the best of my knowledge.
- I acknowledge that a risk management form is available upon request for my inspection at the site.

Signed: _____

Date: / /

Parent (in case of emergency)

NAME

RELATIONSHIP TO CHILD

TELEPHONE (1) TELEPHONE (2) MOBILE

Student Medic Alert Number (If applicable):

*Any health care information provided is not intended to prevent your child participating unless specific medical advice warrants exclusion. The health care information you supply to the school/preschool will be treated confidentially. Such information is sought in order to protect and assist the student so the activity may be a safe and enjoyable experience. Please contact the teacher-in-charge if you wish to discuss any health care problems.

*This form complies with the Education and Care Services National Regulations – Authorisation for excursions



ACTIVITY INFORMATION SHEET

(Note: for a series of activities that take place on a regular basis (including regular outings), list all individual activities, dates, locations, cost, transport, supervision arrangements and start and dismissal times)

REASON FOR AND DESCRIPTION OF PLANNED ACTIVITIES – INCLUDING SPECIALISED CLOTHING OR EQUIPMENT THAT WILL BE REQUIRED AND PROGRAMS PLANNED FOR STUDENTS UNABLE TO ATTEND	2-day camp to Narnu Farm -
TRANSPORT ARRANGEMENTS – INCLUDING DESCRIPTION OF DESTINATION AND PICK UP LOCATION, METHOD, MEANS AND ANY SPECIFIC REQUIREMENTS FOR SEATBELTS OR SAFETY RESTRAINTS	Private Chartered Bus – Link SA
SLEEPING ARRANGEMENTS (WHERE APPLICABLE)	Bunkhouse Dormitories and Cottages
NUMBER OF STUDENT/CHILDREN ATTENDING	75
NUMBER OF SUPERVISING TEACHERS, INSTRUCTORS AND ADULTS ATTENDING	8
FOR EDUCATION AND CARE SERVICES – THE EDUCATOR TO CHILD RATIO	1:10
COSTS – INCLUDING DETAILS OF ANY FINANCIAL ASSISTANCE AVAILABLE	
CONTINGENCY PLANS – INCLUDING ALTERNATIVE PROGRAMS (WHERE APPLICABLE)	
SITE BASED CONTACT PERSON AND TELEPHONE NUMBER AND SITE CONTACT DETAILS	Karen Lydeamore-0409696842 Narnu Farm- 0438 060 585