



# THE WILLOWS STATE SCHOOL

*Excellence is the Standard*

## Activity consent form – Year 6 Camp Magnetic Island

2 March 2020

Dear Parent/Carer

Year 6 students are leaders of our school. We would like to invite them to take part in the Year 6 camp that will take place on Magnetic Island. This camp focuses on developing leadership skills and preparation for their transition to High School in 2020. The camp activities are outlined below.

### Leadership Camp Details:

- Camp will be held at the APEX Camp on Magnetic Island which is situated in Picnic Bay.
- 2 nights and 3 days from Monday 1<sup>st</sup> June to Wednesday 3<sup>rd</sup> June.
- Activities are run by fully qualified instructors from Outer Limits and assisted by our teachers: Raft Building, Kayaking, Amazing Race Challenge, Beach Olympics, Radio Rogaine and Archery Tag.
- All Year 6 students will be attending as 1 group this year.
- Students will meet The Willows State School staff at the Sealink Ferry Terminal. This location is the drop off and collection point.

### Costs:

The cost of the camp is approximately \$265 (Pending final numbers). This includes all transport, accommodation, meals and activity costs. Please note that this is an estimate and we will not know the exact final amount until the end of term. Non-participants will be provided with learning programs at school.

To assist with payment we offer the following payment plan method.

- **An initial non-refundable deposit of \$50 by Tuesday 17<sup>th</sup> March 2020.** (This will secure your child's place)
- A second payment of \$150 will be due on Thursday 23<sup>rd</sup> April 2020.
- The final payment (approximately \$65) will be due on Friday 8<sup>th</sup> May 2020. Full payment must be made by this date.

Please secure your child's place for this camp by completing the attached form and making your deposit of \$50 by the 17th March 2020. This payment is also stating your commitment to the other payments prior to leaving.

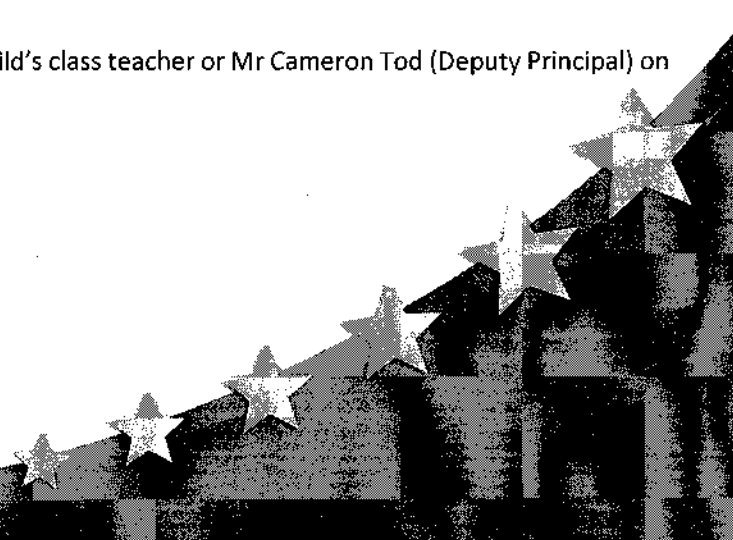
If you are experiencing financial difficulties in regards to these payments, please contact the Business Manager so a payment plan can be negotiated.

For further information about the camp, please contact your child's class teacher or Mr Cameron Tod (Deputy Principal) on (07) 4799 1333.

Yours sincerely

Helen McCullough  
Principal

Cameron Tod  
Deputy Principal



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## Privacy notice

The Department of Education is collecting the personal information requested in this form in order to:

- obtain lawful consent for your child to participate in the activity;
- help coordinate the activity;
- respond to any injury or medical condition that may arise during, or as a result of the activity; and
- update school records where necessary.

The information will only be accessed by authorised school staff and will be dealt with in accordance with the confidentiality requirements of, as applicable, s.426 of the Education (General Provisions) Act 2006 (Qld), the Information Privacy Act 2009 (Qld), and/or the Privacy Act 1988 (Cwth).

The information will not be disclosed to any other person or agency unless the disclosure is authorised or required by law, or you have given the department permission for the information to be disclosed.

## Activity risks and insurance

Please note that the Department of Education does not have personal accident insurance cover for children/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.

## Consent

By signing this form I agree that:

- 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 does not have personal accident insurance cover for students/children.
- I give consent for my child, \_\_\_\_\_ in \_\_\_\_\_ to participate in the Year 6 Camp Magnetic Island activity on 1<sup>st</sup> to 3<sup>rd</sup> June 2020.
- I give permission for my child to participate in the following activities while on the Year 6 Camp Magnetic Island : Raft Building, Kayaking, Amazing Race Challenge, Beach Olympics, Radio Rogaine and Archery Tag.
- I will pay to the school the costs detailed in this consent form for my child's participation in the activity.
- In the event of an accident or illness, school staff may obtain or administer any medical assistance or treatment my child may reasonably require, including contacting my child's doctor.
- I accept liability for all reasonable costs incurred by the department in obtaining such medical assistance or treatment (including any transportation costs) and undertake to reimburse the department the full amount of those costs.
- I have provided the school all relevant details of my child's medical or physical needs on registration /enrolment and where relevant have updated this information.

Parent/Carer's name: \_\_\_\_\_ (Please print)

Parent/Carer signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

## Additional medical information

The school collected medical information about your child at registration/enrolment. This information is stored electronically in OneSchool. Please give full details of any new or updated medical information which may affect your child's full participation in the activity described in the form.

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## You may also wish to update/provide the following optional information\*:

Name of child's medical practitioner: \_\_\_\_\_ Telephone No.: \_\_\_\_\_

Medicare No.: \_\_\_\_\_

Private Health Insurance Company (if applicable): \_\_\_\_\_ Membership No.: \_\_\_\_\_

\*If a registration/enrolment form for your child was completed or updated since October 2012 and these details have not changed, this information will already be recorded in OneSchool.

☐ I would like this additional information about my child's medical information to be recorded in OneSchool records.

## OR PLEASE INDICATE IF YOUR CHILD WILL NOT BE ATTENDING:

☐ Not Attending

My student will not be attending the Year 6 Camp for 2020 and will be provided with a learning program at school