YEAR 7 CAMP

Camp is an exciting time where students build friendships and social skills in a relaxed environment

GAMES AND ACTIVITES

TEAM CHALLENGES Students will work
with mentors and be
involved in many
FUN activities and
games that will
challenge them and
form new longlasting memories

NEW MEMORIES

CAMP FIRE

NEW FRIENDS

This is an unforgettable experience not to be missed!







Important information

What if my child takes prescribed medication?

Make sure you fill out the medical information section of the permission note and indicate the medication and dosage procedures. All medication needs to be labeled in a clear ziplock bag. This MUST be given to the teacher in charge on the day of the camp.

What if my child needs medication overnight?

Your child can bring medication they may need to take (e.g. panadol). Any medication that needs to be taken on camp MUST be given to the teacher in charge with original packaging, correct dosage, and expiry date indicated.

What if my child has special dietary requirements?

Make sure you fill out the dietary requirements section of the permission not and indicate the food products that your child cannot have.

What type of activities will my child be involved in?

So many things! Raft building, bush walking, vertical challenge, giant swings, initiative games and so much more!

What if my child is not following the TRREC values on camp?

Your child will receive warnings. If they refuse to follow instructions and act inappropriately you or your emergency contact listed in the permission note may be called to collect your child.

What will the phone policy be while on camp?

Students will not be allowed to bring their mobiles or other technology devices to camp. It is suggested not to bring anything of value.

What if my child has additional needs during an overnight stay?

At the bottom of the permission note, write down any information you feel is necessary for Miss Nunes to know before the overnight camp.



Ambarvale High School

Thomas Rose Drive Rosemeadow NSW 2560 PO Box 90 Campbelltown NSW 2560

Phone: (02) 4627 1800 Fax: (02) 4628 5289 Email: ambarvale-h.school@det.nsw.edu.au

Principal: Ms L Barnott-Clement, M.A., M.Ed., B.A., Dip.Ed. Deputy Principal: Ms S Arts, M.Ed., B.Sci., Dip.Ed. Deputy Principal: Ms E Fitzgerald, B. Health Science, Dip.Ed,

> Educational Excursion Information and Consent Year 7 Transition Camp 2021 Thursday, 2 December – Friday, 3 December 2021

Dear Parent

As part of Year 7's transition to high school, your child has been invited to attend Year 7 Transition Camp at Camp Wombaroo in Term 4, Week 9 from Thursday, 2 December to Friday, 3 December 2021.

This camp has been planned to celebrate a successful transition into Year 7 and High School. The students who attend camp have the benefit to develop friendships in a relaxed and social environment with their peers and teachers. They will be involved in a variety of games and activities that will help them to develop self-awareness.

When: Thursday, 2 December - Friday, 3 December 2021.

Where: Camp Wombaroo, 162 Black Spring Road, High Range NSW 2575

Itinerary and transport: The camp is a distance from the school and parents will need to drop students to school no later than 8:20am on Thursday, 2 December. Buses will transport students both to and from the camp. Students will need to be collected from school on Friday, 3 December 2021 at 3:20pm.

Cost: \$140.00. The total cost of the camp is \$140.00 per student. To secure your place, a non-refundable deposit of \$40.00 must be paid by Friday, 21 May 2021. The school has subsidised a portion of the cost of the camp for all students. Please note, due to camp site restrictions, there are limited spaces and the first 145 students to return their permission note and deposit will be accepted. All outstanding money will need to be paid online via the school website (www.ambarvale-h.school@det.nsw.edu.au) or to the office by Friday, 29 October 2021. Please take your receipts for all payments and permission note to your Year Adviser, Miss Nunes in the Science Staffroom.

What to bring: A list of camp requirements has also been provided to students with this letter.

Supervising Teacher/s:	Emergency Care	First Aid Certificate
Teacher in Charge: Mrs L Parkin		
Year 7 Adviser: Miss R Nunes		

Please note that the remaining teachers attending the camp will be notified closer to the date of the camp.

Emergency Contact Number: 4627 1800 Ambarvale High School or Camp Wombaroo 1800 888 900, 162 Black Spring Road, High Range NSW 2575

Please complete and sign the permission note attached and provide relevant medical information.

Ms L Barnott-Clement

Principal

20 April 2021

Head Teacher Wellbeing



Educational Excursion Information and Consent Year 7 Transition Camp 2021

I give permission for my child	to attend the Year 7 Transition Camp at
	, 2 December to Friday, 3 December 2021. The cost of the
•	29 October 2021. A deposit of \$40.00 needs to be made by
Friday, 21 May to secure a place. My child must wear ap	ppropriate casual clothing and covered shoes.
This note must be returned to the Year 7 Adviser, Miss	Nunes by Friday, 21 May 2021.
Overnight Accommodation Advice:	
Accommodation will be at Camp Wombaroo. The gro	oup will be supervised by their accompanying teachers and
Camp Wombaroo staff. Ambarvale High School staff have	ve Anaphylaxis and Emergency Care Training.
I understand that I will be contacted to collect my instructions. I may be contacted on the following number	child if he/she acts inappropriately or is unable to followers at the time of the camp:
Home:	Mobile:
Should I be unavailable the following person has my per	rmission to be contacted regarding my child.
Name:	Phone:
Overnight Accommodation ~ Response I understand that my child Additional information about my child during overnight	
\square Night light \square Sleep walks \square Wets the bed \square Nee	eds a comforter (teddy bear) Separation anxiety
☐ Other:	
Parent Signature:	Date:
Water or Swimming Activities - Advice	
The excursion will involve the water and/or swimming	activities
Water or Swimming Activities - Response	
	to participate in the water or
swimming activities. In relation to the proposed water or swimming activities	s. I advise that my child is a: (<i>please tick one</i>)
Strong Swimmer Average Swimmer	Poor Swimmer Non Swimmer

Parent Signature: ______ Date: _____



MEDICAL INFORMATION		
Medical Conditions:		
Allergies:		
Diet Requirements:		
Medication:		
Other:		
Medicare Number (optional):		
Parent and Emergency Contacts:		
Name	Contact Number	Relationship to Student
1		
2		
3		
Parent Signature:	Date:	



Year 7 Camp – Packing Checklist

Clothing		
2 x t-shirts	Full length, no cropped shirts	
1 x warm jumper	Polar fleece preferred (stays warm if wet)	
2x shorts		
1x long pants		
Underwear	1 per day, plus one spare	
Socks	1 per day, plus one spare	
Pyjamas	1 set	
Hat		
Sturdy enclosed shoes	For walking, climbing, running, and hiking	
Shoes (spare)	For wet and muddy activities	
	Bedding/Personal	
Pillow	With pillow case	
Sleeping bag		
Fitted sheet		
2 x towel	Shower + water activities	
Toiletries	Toothbrush, toothpaste, soap, roll-on deodorant, feminine products	
	Other items	
Reusable water bottle	1L minimum	
Sunscreen	30+ SPF	
Torch	Small torch for night activities	
Hair ties		
Insect repellent	Non-aerosol, pump spray only	
Personal Medication	If required – enough for two days	
Sunglasses	Optional	