



Canberra High School
— ESTABLISHED 1938 —

Outdoor Education Year 10 Bushwalking Day Trip, Square Rock Namadgi National Park Friday 23rd October 2020

Departure:	8:00am Friday 23 rd October (Arrive at school at 7:45am to pack)
Return:	4.00pm (approx.) Friday 23 rd October
Transport:	Students will travel by Hertz hire buses
Cost:	\$25.00
Payment/notes cut off date:	<u>Wednesday 21st October.</u>
Cost includes:	Bus hire and fuel.
Not included:	Food and drinks – Students are required to pack and provide: 1 lunch and snacks for the day (high energy). They will also need to bring a minimum of 2L of water for the day.
Attending staff:	Ellen Smith & Simon Beasley (Outdoor Education Teachers)
First aid:	Ellen and Simon have current Wilderness First Aid Australia certifications.
Accommodation:	N/A.
Contact details:	School mobile: 04 47174 322 (when in reception) Satellite phone: 0145354487 (Only switched on in emergencies)

What to bring checklist:

Equipment	Tick	Clothing	Tick
		Hat	
Sunscreen/ lip balm		Sunglasses (optional)	
Personal medication (to be discussed with teacher prior to camp)		Rain jacket *	
		Shirts/pants/shorts (appropriate clothes for bushwalking)	
		Swimmers	
Day pack suitable for hiking*		Warm clothes in case of cold weather	
		1 Pair of comfortable sturdy walking shoes	
Food/Drinks lunch and snacks (at least 2L per person)			

*** Items can be supplied by school. Using personal gear is recommended (discuss with Teacher).**

Note: Weather conditions can be variable in any outdoor environment. Wet and cold weather is always a possibility and should be planned for. These are suggested examples and individual needs may vary.

What NOT to bring: Drugs/alcohol, Pocket knives. Any valuable items such as phones, music devices and cameras etc. are the responsibility of the students. No responsibility for these items will be taken by staff. **ENERGY drinks** are specifically banned at CHS and will be confiscated if found, additionally students position on future camps will be jeopardised.

Camp Ratios: **This camp will be capped to 30 students due to staff/student ratios and COVID restrictions.** To secure a spot on the trip students must pay the camp cost and have handed in the permission note by the mentioned cut off date.

PAYMENT OPTIONS

1. **Payment in person** at school Front Office-between 8:15am & 2:30pm Mon-Fri
EFTPOS facilities are available. Cheques made payable to Canberra High School

2. **Direct Deposit:** Bank: Westpac
BSB: 032777 Acc. No. 001113
Acc. Name: Canberra High School

FEE CODE: OP10BUSH

EXCURSION TITLE: OP10 Bush Walk

3. **Canberra High School Website:** www.canberrahs.act.edu.au
(QUICKWEB)

4. **Phone Payments – Credit cards** Phone: 6142 0800

Please debit my Mastercard Visa

Card Number: _ _ _ _ - _ _ _ - _ _ _ - _ _ _ -

Card Expiry Date: _____ Name on card: _____

Parent/Carer: _____ Student Name: _____

Total Amount Paid: \$ _____

Cardholders Signature: _____

Contact Phone number of Cardholder: _____

As this is an optional enrichment activity, payment will be required to cover the costs. The school has made every effort to keep costs for this activity at a reasonable level. We have an equity fund which can be used to provide financial assistance for students where parents are unable to make the requested contribution. If however there is insufficient total funding available to meet the cost of the camp/excursion, regrettably we may not be able to proceed.

Refund Policy: If a student and/or parent has made a financial commitment to an excursion and if the student is unable to attend for any reason (except in the case of sudden illness), the student and/or parent is entitled to a refund of money paid minus any non-refundable financial outlay that the school has made on behalf of that student. The school will endeavour to find a replacement for that student, in which case, all money will be refunded. The usual appeal provisions apply.



OUTDOOR ADVENTURE ACTIVITY
Permission note
Permission Note to Be Signed by Parents

I give permission for my child
to attend the Outdoor Pursuits Year 10 Bushwalk on Friday 23rd October 2020.

The ACT Department of Education and Training is an agency of the ACT Government (the Territory). The Territory has insurance arrangements in place in order to meet certain liabilities. The Territory meets claims (including claims resulting from school activities or excursions) against it where there is a legal liability to do so. Liability is not automatic and depends on the circumstances in which the injury or illness was sustained. Parents should obtain their own advice about private insurance protection that may assist in meeting expenses if their child is injured or suffers an illness in circumstances where there is no liability on the part of the Territory.
If the outside provider of the service or activity has requested that you sign a waiver or disclaimer statement, the ACT Department of Education and Training recommends that you consider carefully any risks involved before proceeding.

- I authorise the teacher-in-charge to make arrangements for the welfare of the student (including medical or surgical treatment) in an emergency
I agree to meet the costs associated with any emergency arrangement made by the teacher-in charge (free ambulance transportation applies only in the ACT)
I agree that the student will be under the authority of the school for the duration of the activity, and that the teacher-in-charge is authorised to return the student home at the expense of the parent/guardian if the teacher-in-charge considers that circumstances warrant such action
Please complete the attached medical form which will include information about current medical requirements and/or other needs of the child relevant to the activity
The Excursion Medical Information and Consent Form must be completed and returned to the school prior to the excursion.

(Where relevant) I agree to my child travelling by private car, driven by a staff member or leader as the case may be.

(Where relevant) I understand that video and photographic material may be taken of my child on the excursion for assessment, display, moderation and publicity purposes and give permission for this to occur.

Full name of parent/guardian (please print):

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*****Signature of parent/guardian:..... Date:.....

Please indicate any changes to your child's medical information received Term 3

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