

# YEAR 4 CAMP 2023 KIANINNY



<b>COST</b>	\$375	<b>Covers:</b>	Travel	X	Entry		Program	X	Other	X
NOTE: Excursions are an optional enrichment activity and parents are expected to cover the costs incurred. If your child is not able to attend on the day, refunds may not be available for some or all of the costs.										
<b>DEPARTURE DATE</b>	Monday, 6 March 2023				<b>MEETING TIME</b>		7:30 AM in school hall			
<b>RETURN DATE</b>	Wednesday, 8 March 2023				<b>RETURN TIME</b>		Apporx. 4:00 PM at front of school			
<b>EVENT LOCATION</b>	Kianinny, 246 Tathra Road; Tathra, NSW									
<b>MODE OF TRANSPORT</b>	Deane's Chartered Coach									
<b>PURPOSE</b>	To provide opportunities to develop confidence, cooperation, teamwork, and leadership skills									
<b>TEACHER IN CHARGE</b>	Year 4 Team									
<b>ADDITIONAL INFORMATION</b>	Further information regarding camp is attached									
<b>CONTACT NUMBER</b>	6142 3030									

**FORMS DUE TO FRONT OFFICE by 3:30pm on Monday, 13 February 2023**  
**Payment can be made anytime up until Friday, 24 February 2023**

CHILDREN WHO HAVE NOT RETURNED A SIGNED PERMISSION FORM WILL NOT ATTEND.

## YEAR 4 CAMP – KIANINNY 2023 – PAYMENT ADVICE

I consent to my child (name) \_\_\_\_\_ in (class) \_\_\_\_\_ to attend/not attend  
 (please circle) Year 4 Camp - Kianinny 2023.

I (parent name) \_\_\_\_\_ have paid the amount of \$375 by:

<input type="checkbox"/>	<b>CREDIT CARD</b> (Westpac Quickweb)	<input type="checkbox"/>	<b>CASH</b>	<input type="checkbox"/>	<b>CHEQUE</b>	<input type="checkbox"/>
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**Credit Card:** Use PAYMENTS tab on school website home page  
**FEE CODE:** Y4CAMP

## DIETARY REQUIREMENTS:

Does your child have any Dietary Requirements? Please circle one of the following options:

**NO** **YES**

If **YES**, please provide details below:

I have read all the information provided in regards to this excursion and understand its contents:

**Name of Parent:** \_\_\_\_\_ **Best Contact Number:** \_\_\_\_\_

**Signature of Parent:** \_\_\_\_\_ **Date:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_



*I agree to my child participating in the activities associated with this excursion mentioned previously. I have discussed with my child the need for expected behaviour on this excursion. I authorise the school to make arrangements for the welfare of my child (including medical or surgical treatment) in an emergency and I agree to meet the associated costs. I have provided to the school all medical information relevant to my child attending this excursion.*

*I agree that my child will be under the authority of the school for the duration of the excursion and that the school is authorised to return my child to school or home at my expense if the school considers that circumstances warrant such action. I give permission for my child to travel by private car, driven by a staff member or parent, in an emergency.*

**IF MEDICAL INFORMATION HAS CHANGED PLEASE PROVIDE AN UPDATED** Excursion Medical Information and Consent Form **TO THE SCHOOL** (available for download from the school website or from the Front Office).