

26 July 2024

Dear Parent/Carer

## Excursion consent form – Year 9 Camp

Year 9 Camp is scheduled in Week 10 of Term 3 on Monday 9<sup>th</sup> September to Tuesday 10<sup>th</sup> September as part of our Junior Secondary FLYING program. Students will engage in a range of outdoor education activities designed to extend their 21<sup>st</sup> Century Learning focus of Collaboration and Teamwork; as well as Personal and Social Skills.

### Excursion details:

<b>Dates:</b>	Monday 9 <sup>th</sup> September to Tuesday 10 <sup>th</sup> September
<b>Location:</b>	NDSHS Mimburi Campus, 280 Newspaper Hill Road – Belli Creek
<b>Transport:</b>	Polley's Coaches
<b>Itinerary:</b>	Depart: Monday 9 <sup>th</sup> September, Cooroy Campus – 9am Return: Tuesday 10 <sup>th</sup> September, Cooroy Campus - 2:45pm
<b>Dress Requirements:</b>	Casual clothing – Equipment List to come out closer to the camp date
<b>Equipment:</b>	An equipment checklist will be sent out at a later date, including information about mobile phones as this is a device free camp.
<b>Activity Risk Level:</b>	Some activities on this camp are at a 'high risk' level and require your permission below.
<b>Supervision:</b>	Mr Gordon, Mrs Greenhalgh, Mr Mahoney and Home Group teachers
<b>Expectations:</b>	Student behaviour expectations are as per the NDSHS <a href="#">Student Code of Conduct</a>
<b>Meal Arrangements:</b>	Students are required to bring morning tea on the first day of camp. Lunch, afternoon tea, dinner, breakfast, morning tea and lunch on the second day is provided. Please list any dietary needs on the attached medical form.
<b>Due Date:</b>	Forms and payment are required by Wednesday 7 <sup>th</sup> August

### Excursion costs:

Students must be in financial good standing (Student Resource Scheme (SRS) fees up to date or entered a payment plan) to participate in the excursion. Those students who do not attend will be provided with alternate learning/assessment activities. If you wish to discuss a payment plan, please contact the Finance Office on 54722222. The cost for the camp is **\$35** per student. This will be invoiced to you.

If you wish for your child/student to participate in the excursion, please complete this consent form and return all pages (including this page) to Mr Gordon by **Wednesday 7<sup>th</sup> August**. Students who do not attend camp will have an alternate program offered at school supervised by the deputy principal Mr Lee Merrett.

For further information about the excursion, please contact Mr Gordon on 5472 2222 or [mgord41@eq.edu.au](mailto:mgord41@eq.edu.au).

Yours sincerely

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**Ms Stacy Wilmore**  
Principal  
Noosa District State High School

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**Mr Murray Gordon**  
HOD HPE / Middle Secondary  
Noosa District State High School

# Excursion consent form – Year 9 Camp

## **Activity risks and insurance**

The Department of Education does not have personal accident insurance cover for children/students. If a child/student 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 the parent/carer has private health insurance, some costs may also be covered by your provider. Any other costs must be covered by the parent/carer. It is up to the parent/carer to decide the type/s and level of private insurance they wish to arrange to cover their child. Please take this into consideration in deciding whether or not to allow the child/student to participate in this activity.

## **Consent**

By signing this form, I agree to all the following statements:

- I have read all of the information contained in this form in relation to the excursion (including any attached material)
- I am aware that the department does not have personal accident insurance cover for children/students.
- I give consent for the named child/student, \_\_\_\_\_ to participate in the identified excursion.
- I will pay to the school the costs detailed in this consent form for the child/student's participation in the excursion.
- I agree to and understand the refund policy as it applies to this excursion (see Excursion costs)
- In the event of an accident or illness, school staff may obtain or administer any medical assistance or treatment the child/student may reasonably require, including contacting their 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 with all relevant details of the child/student's medical or physical needs on registration/enrolment and where relevant have updated this information.
- I give consent for child/student contact information to be shared in relation to this excursion in compliance with relevant [Queensland Chief Health Officer's Directions](#).

Parent/Carer/Student*	Name:		
	Phone number:		
	Email address:		
	Signature:		Date:
Emergency contact information for the duration of this excursion	Name:		
	Phone number/s:		

## **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 excursion described in the form.

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

Name of child/student's medical practitioner: \_\_\_\_\_ Telephone No.: \_\_\_\_\_  
Medicare No.: \_\_\_\_\_  
Private Health Insurance Company (if applicable): \_\_\_\_\_ Membership No.: \_\_\_\_\_

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

**\*Students that are independent, mature-age or over 18 years of age may provide their own consent and be responsible for all related costs.**

## **Privacy Statement**

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

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

The information will only be accessed by authorised departmental staff. The information will not be disclosed to any other person or agency unless we have your consent or we are required or authorised by law to do so e.g. in compliance with relevant [Queensland Chief Health Officer's Directions](#)