

#### GILSTON STATE SCHOOL

588 Worongary Road Gilston QLD 4211

Phone: 5501 2333 Email: admin@gilstonss.eq.edu.au Website: www.gilstonss.eq.edu.au

Excursion Name	Year 5 Camp Bornhoffen		Reference Code	Y5 Bornhoff		
Date of Excursion	Wednesday 26 - Friday 28 August Ti		Time of Excursion	9:15am Wednesday – 2:15pm Friday		
Location of Excursion	CAMP BORNHOFFEN		Class / Year Level	Year 5		
Risk Level of Activity	Low / Medium / High / Extreme					
Excursion Activities/Purpose	Team building skills, leadership opportunities, outdoor education program including creek & bush experiences, high/low ropes, and pole climb.					
Potential Hazards if applicable	Hazards associated with the above activities.					
Transport Details	Bus depart 9:15 am Bus returns 2:15pm Students are asked to arrive at their classrooms at 8:45am ready for 9:15am departure					
Participant Equipment Checklist	See attached list in email					
Other Requirements	Please complete attached Medical and risk recognition form. Morning tea, lunch, afternoon tea and water required for Day 1					
School Contact Person	Year 5 classroom teacher					
<b>Excursion Cost per Student</b>	Total cost \$295.00	No late pa	ate payments will be accepted – see below for due es			

#### **Activity Risks and Insurance**

The activity outlined above carries an inherent risk of physical injury occurring. Please note that the Department of Education, Training and Employment does not have personal accident insurance cover for students. If your child is injured as a result of an accident or incident, 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.

### **BPoint - QParents & Credit Card Payment - Thursday 13 August 2020**

BPoint and, QParents payments, including credit card over the phone can be made using the details on the invoice and must be made at least 3 days prior to the due date to allow for the payment to show in the school account by the due date.

## Internet Payment - Final Date for Payment - Thursday 13 August 2020

Internet payments can be made by using the details below and must be made at least 3 days prior to the due date to allow for the payment to show in the school account by the due date.

School's Bank Account Name: Gilston State School General

BSB Number: 064-468 (Commonwealth Bank Australia)

Account Number: 10012085

Description of Payment: Enter student EQ ID as shown on invoice & excursion reference code Y5 Bornhoff

#### Payment Office/Window - Final Date for Payment - Thursday 13 August 2020 between 8:00am and 10:00am

Cash, eftpos and credit card payments can be made in person at the school payment window any Thursday and Friday between 8:00am and 10:00am.

<u>Please note: no late payments will be accepted</u> unless prior arrangements have been authorised by the Principal.

# **Activity Consent Form for Year 5 Camp Bornhoffen**

## Consent

	complete the required information and check all appropriate boxes below to urn to the class teacher.	indicate yo	ur agreer	nent/consent		
	I have read all of the information contained in this form in relation to the	activity (in	ncluding a	any attached		
	material), and I am aware that the Department of Education, Training and E	Employment	do not h	ave personal		
	accident insurance cover for students.					
	I give consent for my child		_ (print c	hild's name)		
	in class to participate in the activity detailed above.					
	In the event of an accident or illness, I authorise school staff to obtain or administer any medical assistance or					
	treatment my child may reasonably require, including contacting my child's doctor. If it is deemed necessary					
	by Gilston State School staff, I agree to drive to Camp Bornhoffen promptly	to collect m	y child.			
	I have provided the school all relevant details relating to my child's medical of	or physical 1	needs on o	enrolment		
	and where relevant have updated this information.					
	In the event of any behaviour incidents I agree to drive to Camp Bornhoffen promptly to collect my child if					
	deemed necessary by Gilston State School staff. This may include behaviour	which is co	onsidered	unsafe,		
	behaviour which impacts on the supervisory responsibilities of staff or behaviour	iour which j	places the	reputation		
	of Gilston State School into disrepute.					
☐ I accept liability for all costs incurred in obtaining such medical assistance or treatment (including any						
	transportation costs) and undertake to reimburse the State of Queensland (v	•	artment o	f Education,		
	Training and Employment) the full amount of any costs incurred on my child	s behalf.				
Parent/	Carer Name:		(ple	ase print)		
Parent/	Carer's Signature: Da	ate:	_/	/		