



Years 12 February 25-26 February 2021 / Camp Consent and Medical Form

Student's Name:	Year Level:
Parent / caregiver's Name: Phone (mobile): Phone (work):	
Emergency Contact Name: Phone (mobile): Phone (work):	
Permission I do / do not give permission for the above student to attend and participate in the school camp taking place at TONGARIRO from Thu 25 to Fri 26 February 2021.	
Camp Fees I do / do not enclose the \$150 camp fee before Monday 22 February 2021. I wish to set up three payments of \$50 to be paid during Term 1 - and understand that I will be contacted by an office staff member to confirm payment details. I understand that fees will be used to assist with transport, food and accommodation costs and that these costs are being subsidised by POET (the Perry Outdoor Education Trust).	
Personal Property / Digital Device I understand that it is my son / daughter's responsibility to care for his / her personal property and that the school will not accept any responsibility for the loss or damage of personal property. I understand that digital devices of any kind are not to be brought to this camp. This includes cell phones, electronic games etc.	
Behaviour Management I understand that should my son / daughter be involved in a serious disciplinary matter , that I will have to take responsibility for the collection of my son / daughter from the camp.	



Health Concerns

Please note below any health concerns that may affect your son/daughter during camp. This includes bedwetting, allergies, special dietary needs and / or any other relevant health conditions.

Health Concerns Treatment (what actions should be taken)

Personal Medication

I understand that my son / daughter will be administering and caring for his / her own personal medical needs unless specifically listed below. I authorise staff to obtain on my behalf any ***medical assistance*** if such treatment is necessary. I understand that I will be kept informed as soon as possible in the event of this occurring.

Other Information (please list any further information that may be useful for staff to know)

Parent / Caregiver Signature