# BELIEVE, PERSEVERE, SUCCEED

### BRISBANIA PUBLIC SCHOOL

"BELIEVE, PERSEVERE, SUCCEED" 1 HIGH STREET SARATOGA NSW 2251

Tuesday 9 May 2017

## REMINDER NOTE: Year 5 Overnight Excursion Broken Bay Sport and Recreation Centre, Hawkesbury River Monday 15-Friday 19 May 2017

**Dear Parents and Caregivers** 

The Year 5 overnight excursion is fast approaching and the students are very excited. Outlined below are some final reminders about times, what to pack and also medical requirements. **Please note that the return time has changed, with students now returning to Patonga Wharf at 1:45pm (not 1pm)**. This is due to a late change in the activity program.

**Excursion Details** 

**Date and Time:** Students are to arrive at Patonga Public Wharf, Patonga Road, Patonga NSW 2256 on

Monday 15 May at 8:45am. Students will return to Patonga Public Wharf at

approximately 1:45pm on Friday 19 May, 2017.

\*Please ensure you allow enough time to arrive by 8.45am on Monday as the ferry timetable is very rigid and late students may jeopardise activities for the rest of Year 5.

**Travel**: Students will be travelling to Broken Bay Sport and Recreation Centre by ferry from

Patonga Public Wharf. The ferry contractor is *Palm Beach Ferries*. Parents must arrange their own transport to and from Patonga Public Wharf for their child.

**Activities:** Students will participate in a number of outdoor recreation activities, including

water activities, such as a flying fox, raft building, abseiling, canoeing, team building

activities and many more.

**Accommodation**: Students and staff will be staying at Broken Bay Sport and Recreation Centre,

Hawkesbury River, NSW 2083.

**Meals:** Thank you for completing the online medical and dietary forms. This information has

been used by the camp staff to ensure that dietary needs of all students are met. If your child requires medication while away at camp, please complete the attached

form and give to Mr Ingram, with medication, on Monday morning.

What to Bring: See reverse.

The students will be reminded about all of the above information this week at school. Thank you to all parents and carers for your vigilance and support with completing all the necessary documentation and payments. It promises to be a worthwhile experience for all students. For any further questions, please contact the school or your child's teacher.

Clint Lowe

Assistant Principal

#### What to Bring

#### Luggage

One piece of luggage, a sleeping bag and a small day backpack is recommended per child. These should be clearly marked with your child's name, address and phone number. Remember, your child will have to carry their luggage so it's good to make sure it's not too big or too heavy. Items needed on the trip should be packed in the backpack.

**Clothing-**please label all clothing, towels and sleeping bag with your child's name.

- ✓ Shorts and t-shirts (no singlets, sleeveless or midriff tops)
- ✓ Jeans
- ✓ Jumpers and tracksuit pants
- ✓ Socks and underwear
- ✓ Raincoat
- ✓ Warm jacket
- ✓ Pyjamas
- ✓ Swimming costume and rashie shirt
- ✓ Sunscreen, sun hat and sunglasses
- ✓ Two pairs of running shoes (one old pair to wear in the water)
- ✓ Toiletries, soap, lip balm and insect repellent (no aerosols)
- ✓ Two towels
- ✓ Pillow, sleeping bag or doona and two single flat sheets
- ✓ Day backpack
- ✓ Paper, pens or pencils
- ✓ Plastic bags for dirty or wet clothes
- ✓ Medication (if required). This will be given to staff on Monday morning.
- √ Handkerchief or tissues
- ✓ Water bottle

#### **Optional**

- ✓ Camera
- ✓ Up to \$20 for souvenirs. If students are using phones as cameras, SIM cards MUST be removed beforehand and shown to teachers.

#### **Student Medication Form**

Please complete this form if your child requires any medication while away at camp in Week 4. Completed forms must be given to Mr Ingram, with medication, on Monday morning before boarding the ferry.

The following <b>EXACT DETAILS</b>	must be completed.	
What is the medication?		
What is the dosage?		
When is the medication to be	administered?	
NAME OF CHILD:	YEAR:	
I hereby give permission for th	ne following medication to be administered by t	eacher/s on the excursion.
NAME:	t) SIGNATURE:t) (Parent/Guardia	<del></del>
(Please Print	t) (Parent/Guardi	an)
DATE:		