



Woorabinda

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APPLICATION FORM

Please return this form to your school by the due date

Name of School :.....

Child's Surname :.....Given Names :.....
(Underline or add home name)

Address:.....Postcode.....

Phone Home:.....Work.....Mobile.....

Date of Birth.....Emergency Contact.....Phone.....

PARENT'S OR GUARDIAN CONSENT

I hereby endorse my child's attendance at Woorabinda School Camp and I am fully committed to my child's participation in the five-day program. I also agree to his/her participation in any excursion arranged for children in connection with the camp program. In the event of any accident or illness, I authorise the obtaining on my behalf of such medical or surgical treatment as my child may require and I accept the responsibility for payment of any expenses thus incurred.

Parents / Guardian's Name:

Signature: Date:

STUDENT'S DECLARATION

I hereby declare that I am fully committed to my participation in the five days of the Woorabinda School Camp program. I also declare that while traveling to and from camp and while in attendance there, I shall behave appropriately and shall obey all the rules decided upon as best for the welfare of all.

Student's Signature:

CANCELLATION/REFUND

The Department of Education reserves the right to cancel a camp for any reason. No refunds will be made where a camper leaves the camp during its session except in the case of illness and then on pro-rata basis only. If a student withdraws prior to program (1 week or less) a refund will only be issued if the student can be replaced by their school, another attending school or if the student supplies a medical certificate explaining withdrawal circumstances.

PHOTOGRAPH PERMISSION

Woorabinda School Camp has a website, www.woorabinda.vic.edu.au and many families enjoy the opportunity to view their child's photograph. Group photos and candid shots are taken throughout the camp. However the Department of Education and Training requires Parental/Guardian approval for these to be published. Could you please complete the following.

I **do/don't** give permission for my child's photograph to appear on the Woorabinda School Camp Website. (Please tick appropriate box) **Yes** **No**

Signed.....Parent/Guardian

*Please return form to the teacher in charge of camp organisation at your school.