



Carlton Gardens Primary School

No. 2605
215 Rathdowne Street, Carlton 3053
Phone: 9663 6502
Fax: 9639 1220

e-mail: carlton.ps.rathdowne@edumail.vic.gov.au
web address: www.carltongardens.vic.edu.au

Year 5/6 Lady Northcote Camp Rowsley 2013

Tuesday 4th – Friday 7th June

Dear Parents/Guardians,

Students in grade 5/6 will be heading to **Lady Northcote Camp in Rowsley Valley**, which is located in Bacchus Marsh, approximately an hour and a half outside of Melbourne. The camp will run from **Tuesday 4th till Friday 7th of June**. Our focus while on camp will be team building, outdoor education and physical fitness. Students will be involved in adventure activities; these will be outlined in more detail closer to the date. Students will be staying in dormitory style accommodation.

Camps contribute significantly to the school's ability to deliver curriculum outcomes in many discipline areas, including important aspects of health and physical education and interpersonal development curriculum areas. Camps provide unique opportunities to foster peer relationships, and develop emotional wellbeing and strength. This year's camp will also extend and develop learning in our unit of inquiry. **With this in mind, all year 5/6 students are expected to attend camp.**

Please refer to the website (link below) for further information. Please note that the activities we offer students are catered for their age group.

<http://www.camps.ymca.org.au/discover/lady-northcote.html>

We have endeavoured to keep costs to a minimum, and to assist you in managing this cost we have made a number of options available regarding payment of camp fees. Please read the following information carefully and return the consent form completed with your preferred payment option **by Friday 15th March**. Medical forms will be sent home closer to the camp date.

Many Thanks,

Xavier Nordan & Mirella Faulkner



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I give permission for my child _____ in grade _____ to attend the Lady Northcote Camp Rowsley, in Bacchus Marsh from Tuesday 4th – 7th June 2013. In case of emergency, I authorise the camp staff to consent, where it is impractical to contact me, to my child receiving such medical and/or surgical treatment as may be deemed necessary. I agree to pay all costs incurred.

Does your child have any dietary requirements? **Yes/No**

If yes, please specify:.....

THREE PAYMENT OPTIONS (please tick one)

Option 1: Payment of entire cost		
Total Camp Cost	\$310	Monday 13 th May
Please tick <input type="checkbox"/>		
Option 2: Initial deposit and remaining camp payment		
Camp deposit	\$100 (paid by Monday 15th April)	
Remaining camp fees	\$210 (paid by Monday 13 May)	
Please tick <input type="checkbox"/>		
Option 3: Initial deposit and payment by 3 instalments		
Camp deposit	\$80 (paid by Monday 15th April)	
Instalment 1	\$80 (paid by Monday 29th April)	
Instalment 2	\$80 (paid by Monday 13th May)	
Instalment 3	\$70 (paid by Monday 20th May)	
Please tick <input type="checkbox"/>		

If you require any further assistance with the payment plan, please contact Xavier, Mirella, Trish or Andrew as soon as possible.

PARENT NAME: _____ PARENT SIGNATURE _____

CONTACT TELEPHONE NUMBER _____ MEDICARE NO: _____

DATE _____