

2018 Riverina Strings and Recorders Camp Information for Parents/Carers and Applicants

The 2018 Riverina Strings and Recorders Camp will be held from **Monday 4 June to Friday 8 June** at Borambola Sport and Recreation Centre.

The camp is open to public school students from **Years 3-12** who play violin, viola, cello, double bass, descant, treble, tenor or bass recorder, classical guitar or ukulele. Students who are not currently playing in a school group or orchestra are still welcome to attend.

Students will experience intensive tutorial sessions, small and large ensemble playing, recording sessions, evening concerts and a formal concert at the conclusion of camp. These concentrated opportunities enable students to further develop their music knowledge and performance skills. Students will also take part in activities run by Borambola Sport and Recreation Centre staff.

The \$420 camp fee covers all accommodation, meals, tuition, and recreation activities. A deposit of \$100 must accompany each application, the balance to be paid by Tuesday 15 May 2018. In the event that a student is not accepted to camp all money paid will be refunded. If a student withdraws from the camp prior to Friday 18 May 2018 the deposit of \$100 will be forfeited (unless an appropriate doctor's certificate or similar evidence is provided). If a student withdraws after Friday 18 May 2018 the full fee will be forfeited unless an appropriate doctor's certificate or similar evidence is provided.

Payment can be made online at www.sthwagga-p.schools.nsw.edu.au via the payments tab or by cheque, made payable to *South Wagga Public School*, labelled *Strings and Recorders Camp* on the back and posted with application form. If paying online, please list the class as Riverina Strings and Recorders Camp

Please return Application, School Approval and Department of Education Medical forms by **Tuesday 1 May**:

Email: judith.gollasch@det.nsw.edu.au or

Mail: 2018 Riverina Strings and Recorders Camp
C/- South Wagga Public School
Edward Street, Wagga Wagga NSW 2656

Additionally, a **Borambola Sport and Recreation Medical Form is to be completed online by Tuesday 1 May** at their website <http://dsr.nsw.gov.au/schoolcampmedicalform>

Correct details as listed below must be included when completing the form:

- Booking number: 494449
- Booking start date: 03/06/2018
- Booking Venue: Borambola Sport and Recreation Centre.

For further enquiries please contact:

Judy Gollasch,
2018 Riverina Strings and Recorders Camp Coordinator
Phone: 0428 295 227
Email: judith.gollasch@det.nsw.edu.au

Application and \$100 deposit are required by Tuesday 1 May 2018
Borambola Medical Form to be completed by Tuesday 1 May 2018.
Full payment to be completed by Tuesday 15 May 2018

2018 Riverina Strings and Recorders Camp

INFORMATION FOR STUDENTS

DATE: Monday 4 June to Friday 8 June 2018

Registration commences at 9.00am Monday 4 June 2018.

Students depart on Friday 8 June 2018 after the concert commencing at 2.00pm.

VENUE: 1980 Sturt Highway, Borambola via Wagga Wagga NSW 2650

Phone: (02) 6928 4300 (for emergency use only)

CONCERT: Friday 8 June 2018 at Borambola Sport and Recreation Centre commencing 2.00pm
- for the enjoyment of family and friends.

COST: \$420 paid online at www.sthwagga-p.schools.nsw.edu.au or by cheque made payable to *South Wagga Public School* and labelled *Strings and Recorders Camp* on the back.

WHAT TO BRING:

- Musical instrument/s
- Pencil and rubber
- Music stand labelled with your name (i.e. if you possess a music stand)
- Spare strings
- Water drinking bottle
- Any personal medications clearly labelled with name
- Bedding – a sleeping bag OR sheets, pillowcase & doona.
(There are blankets and light quilts available in dorms.)
- Bath towel, soap, toothbrush, hairbrush and toiletries
- Warm and appropriate sleepwear and clothing
- Three pairs of covered in shoes (Bring one extra pair in case one pair gets wet.
Also bring a black pair of shoes for the concert.)
- Waterproof jacket
- Concert clothes - black pants or skirt, black shoes and socks, white shirt.
(If wearing a skirt please wear black stockings.)

Primary students, please do not bring computers or any devices with internet access, they will not be allowed to be used. Secondary students requiring internet access for school purposes please phone to discuss arrangements prior to camp.

All personal belongings and instrument cases are to be clearly labelled.

For further enquiries please contact:

Judy Gollasch,

2017 Riverina Strings and Recorders Camp Coordinator

Phone: 0428 295 227

Email: judith.gollasch@det.nsw.edu.au

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2018 Riverina Strings and Recorders Camp

CORE RULES

Students attending the 2018 Riverina Strings and Recorders Camp will adhere to the core rules of the camp as follows:

- Students are expected to comply with the instructions given by attending tutors, teachers, parents/carers and staff showing respect for the program and all those who have committed their time to making the camp a high-quality event.
- The camp is smoke, drug and alcohol free.
- Dress code and behaviour appropriate to the camp situation should be maintained at all times.
- Under no circumstances are boys permitted in girls' accommodation and bathrooms or girls permitted in boys' accommodation and bathrooms.
- Mobile phones must be switched off during rehearsals and tutorials and between 9.00pm and 7.00am. Failure to comply will result in the phones being confiscated for the duration of the camp.
- The camp coordinator, tutors, supervisors and staff and the management of the camp facility are not responsible for any items belonging to individuals. Students must take care of their own property at all times.
- Students are expected to behave in a safe, considerate, courteous and responsible manner at all times. They are expected to treat other students and adults with dignity and respect and to take care of their own property as well as property belonging the venue and others.

2018 Riverina Strings and Recorders Camp Application

Complete a separate form for each applicant

STUDENT INFORMATION

First name: _____ Surname: _____

School: _____ Year: _____

Age: _____ Date of birth: ____/____/____ ☐ Male ☐ Female

Postal address: _____ Postcode: _____

PARENT'S/CARER'S INFORMATION

First name: _____ Surname: _____

Home phone: _____ Work phone: _____ Mobile: _____

Email: _____

Name of other contact person (if parent is unavailable):

Home phone: _____ Work phone : _____ Mobile: _____

INSTRUMENT FOR CAMP

Violin	Viola	Cello	Double Bass
Descant Recorder	Treble Recorder	Tenor Recorder	Bass Recorder
Guitar	Ukulele		

Years played: _____ Exam level (if applicable): _____

Other instrument/s played _____

Brief summary of musical experience within school and/or community

Please forward APPLICATIONS by Tuesday 1 May 2018

Online forms can be completed, saved and emailed to -

Email: judith.gollasch@det.nsw.edu.au

Printed forms can be mailed to -

Mail: 2018 Riverina Strings and Recorders Camp,
C/- South Wagga Public School
Edward Street, WAGGA WAGGA NSW 2656

2018 Riverina Strings and Recorders Camp

STUDENT CONTRACT

I agree to attend the 2018 Riverina Strings and Recorders Camp participating at all times according to the core rules of the camp. I accept that failure to do so will result in disqualification from the camp and being sent home at my parents' expense.

I understand that while at camp I am under the supervision and management of Department of Education teachers, staff and tutors and the manager and staff of Borambola Sport and Recreation Centre.

I agreed to contract ☐ Yes ☐ No

Name of student: _____ Date: ____/____/____

PARENT/CARER CONTRACT

I agree to my child's attendance at the 2018 Riverina Strings and Recorders Camp, to its related conditions and to my child's involvement in all activities arranged for the camp.

In the event of accident or illness, I authorise the obtaining on my behalf of such medical assistance as my child may require. I also undertake to pay medical fees and cost of medication which may be incurred while my child is attending the camp.

I agree that my child must comply with the behaviour standards required by staff and abide by the core rules of the Riverina Strings and Recorders Camp. I accept that failure to comply shall result in my child being disqualified from the camp and will require me to collect them from camp and/or meet the travel expenses that may be incurred.

I agreed to contract ☐ Yes ☐ No

Parent or Carer Name/Signature: _____ Date: ____/____/____

GENERAL RELEASE DEED

I hereby give permission for the Department of Education to use photographs, sound, film or video recording of my child's participation in the 2018 Riverina Strings and Recorders Camp for the purpose of promotion of the camp by the Department of Education.

I give approval Yes No

Parent or Carer Name/Signature _____ Date: ____/____/____

NB: In the case of no approval being provided, the parent/guardian is asked to confirm this decision with the Camp Coordinator verbally, either by phone or in person.

2018 Riverina Strings and Recorders Camp
SCHOOL APPROVAL**STUDENT**

Name of student: _____

School Year: _____

SCHOOL

Name of school: _____

Name of contact teacher: _____

School phone: _____ School fax : _____

Email contact: _____

I approve the above mentioned student's participation in the 2018 Riverina Strings and Recorders Camp. I understand that this activity will encompass five school days and will take place from Monday 4 June to Friday 8 June 2018.

Name of Principal: _____

Signature of Principal: _____

Date: ____/____/____



**NSW DEPARTMENT OF EDUCATION
MEDICAL INFORMATION FORM – Page 1**

Student's name: _____ **School Year:** _____

Parent's/carer's name: _____

The information provided on this form is obtained for the purpose of ascertaining relevant medical information, requirements and other health care needs about your child who may participate in school excursions, sporting activities or other educational or school activities conducted by or in conjunction with their NSW public school.

It will be used by officers of the Department of Education to assist planning, to support students, and to minimise risks when conducting rehearsals, performances or other activities.

Other persons or agencies that may be provided with this information include, but are not limited to, volunteers and members of external organisations who join with the Department of Education or are otherwise involved in the planning or delivery of the rehearsals, performances or other activities; and persons who may be called upon to provide health care treatment or other assistance during or as a consequence of such rehearsals, performances or activities.

Provision of this information is not required by law, but, a failure to provide the information may mean that your child cannot participate in all activities.

Provision of this information will significantly assist in planning a safer environment for rehearsals and performances. It will be stored securely and used in the fulfilment of our appropriate duty of care for your child. If you have any concerns about providing this information, please contact the Coordinator to discuss this further. We respect the fact that some information may be personally sensitive for the individual child.

Please correct or update any personal information provided as appropriate by contacting the event coordinator, Judy Gollasch, phone 0428 295 227.

Medicare number: _____ **Position on Card:** _____

Private Health Care number: _____

Parent/carer contact details

Name: _____

Address: _____

Telephone: Home _____ Business _____ Mobile _____

Doctor contact details

Name: _____

Address: _____

Telephone: _____

Emergency contact(s) details (nominated by the parent/carer as alternate contact)

Person 1

Name: _____

Address: _____

Telephone: Home _____ Business _____ Mobile _____



NSW DEPARTMENT OF EDUCATION
MEDICAL INFORMATION FORM – Page 2

Person 2

Name: _____

Address: _____

Telephone: Home _____ Business _____ Mobile _____

List existing medical conditions or illnesses (include asthma, diabetes, epilepsy, allergies etc.).
Outline the treatment for each. Attach additional sheets if required.

Condition	Current treatment

Outline special dietary needs:

Possible reaction to inappropriate diet:

Medication(s) to be administered during these activities. Include name of medication, instructions for administration, time of administration, and any possible reactions

Medication name	Form (tablet etc)	Dosage, time, methods	Possible reactions

Has your child attended a doctor for treatment of any serious illness recently? YES / NO

If YES please give details:

Date of last tetanus injection: _____ or within last 2 years _____ 5 years _____

Parent or Carer Name/ Signature : _____ Date: ____/____/____

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