OLE! 2015
Year 5 & 6 Outdoor Experience
‘Discovering Yarramundi, Discovering Me’
Information Package

The vision:

During Term 4, Week 1 all students in Years 5 & 6 will be involved in OLE! 2015.

OLE! Week is a compulsory and unique multi-day/overnight College event and OLE! stands for Other Learning Experiences. OLE! Week is a wonderful opportunity for Oxley students to explore new experiences with their peers in a supervised and supportive environment, and immerse themselves in activities we hope will extend and enrich their lives beyond the classroom, particularly with an outdoor, service or cultural focus.

Oxley College has contracted an outside provider, YMCA NSW to conduct the Year 5 & 6 OLE! Experience during Term 4, Week 1 (Tuesday October 6 to Friday October 9).

Programme Summary:

Set in natural bushland at Yarramundi in the Hawkesbury Valley, this four day programme offers a range of activities designed to build confidence and resilience, encourage team work and communication, and inspire initiative and critical thinking.

Visit the YMCA NSW website for further details: http://camping.ymcansw.org.au/camp-yarramundi

The bus will depart Oxley College on Tuesday at 9.00am and return on Friday at approximately 3.00pm.

Included in this package:
- Permission note
- Medical form
- Equipment/packing list

All notes are due back to the classroom Teacher by Friday 14 August 2015

If you have any concerns or queries regarding this OLE! activity or require additional forms, please do not hesitate to contact our Co-Curricular Administrator, Miss Natalie Lane, on natalie.lane@oxley.nsw.edu.au.
OLE! 2015
Year 5 & 6 Outdoor Experience
Permission Note

Please complete the following permission slip and medical forms and return to the Teacher by Friday 14 August 2015.

Student Details:
Surname: ______________________
First Name: ______________________

I hereby give permission for my son/daughter to take part in the Year 5 & 6 Outdoor Experience conducted by YMCA NSW during OLE! Week 2015: Tuesday 6 to Friday 9 October 2015.

Parent/Guardian’s Signature: ______________________ Date: ______________________

I have returned the following forms (please circle):

YMCA NSW Consent Form Yes
Medical Form Yes
Asthma Management Plan (only if applicable) Yes / N/A
Allergy Management Plan (only if applicable) Yes / N/A
# Medical & Consent Form

**Name of Student:**

**Address:**

**Age:** D.O.B: / / **Sex:** **Height:** **Weight:**

**Emergency Contact:** Name: **Phone:** (hm) (wk) (mob)

**Medicare Number:** No. on Card: **Ambulance Cover:** Y / N:

**Private Medical Cover:** Y / N: (**details**)

**Doctor’s Name:** **Phone:**

**Does your child suffer from: any chronic injury or illness?** Y / N: (details)

: **Asthma**? Y / N: **Triggers:** (**details**)

**Does your child have any allergies?** (eg drugs, food, plants) Y / N: (**details**)

**Does your child suffer from:** Heart Problems ? Y / N: (details)

: **Blood Pressure**? Y / N: (**details**)

**Does your child have any emotional / behavioural disorders?** Y / N Phobias ? Y / N

If yes please specify:

**Does your child require medication?** Y / N **May we administer Paracetamol if required?** Y / N

**Has your child been ill or required medical attention in the last four (4) weeks?** Y / N

If yes please specify:

If your child has seen a doctor in the last four weeks please attach a medical certificate consenting to their attendance.

**Date of last tetanus injection:** ___________________. (if your child’s tetanus is not current please see your doctor)

**Does your child: Wet the Bed?** Y / N **Sleepwalk?** Y / N **Suffer travel sickness?** Y / N

**How would you rate your child’s swimming ability?**

- [ ] **Unable** – Nothing more than dog paddle
- [ ] **Poor** – Basic strokes, only limited strokes beyond domestic swimming pool
- [ ] **Good** – Strong swimmer, able to swim confidently in a variety of water conditions
- [ ] **Excellent** – Very strong and confident, could swim 50 mtrs fully clothed (Please give details of swimming certificates attained eg Bronze Medallion)

**Special Dietary Requirements?**

**Activity Restrictions?** See attached list.

Ntb/ Activities are chosen to suit the age and ability of campers

Camper will not have sufficient time to do all activities

If there is insufficient space please attach separate page with details

---

**PARENT or GUARDIAN CONSENT**

As parent / guardian I understand that the YMCA NSW and its instructors will take reasonable care for the welfare and safety of those attending the camp but are not responsible for any accident or sickness otherwise occurring. I acknowledge that going on camp may involve my child / ward’s participation in activities of a hazardous nature, though the YMCA and its instructors will take reasonable care to minimise risk to participants.

I have detailed herein and on any attached pages any disabilities or susceptibilities affecting my child / ward, that may place him / her at greater than normal risk. I authorise the YMCA NSW and its instructors to obtain medical assistance and ambulance transportation in the event of illness or injury as they think necessary and authorise qualified medical practitioners to administer anaesthetic, blood transfusions or any other procedures deemed necessary. I also agree to pay all the cost of any expenses incurred as a result of such medical assistance and ambulance transportation. I acknowledge that I am able to obtain private insurance cover for my child / ward in respect of any accidents or sickness at the camp. Should my child/ward need to be returned home for any reason I will cover any associated costs.

I consent to my child/ward attending camp on this understanding.

---

The information provided by participants is obtained for the purpose of supporting employees and providing high-quality program. It will be used by the YMCA of Sydney to meet the duty of care and child protection responsibilities of the organisation and to support the information needs of the employees and participants. The information will only be disclosed for purposes directly related to the purpose for which it is collected.
CAMP GUIDELINES:

- Never leave camp or activity areas without permission
- All activities must be supervised by an instructor and a teacher
- Listen to and follow instructors’ guidelines and instructions
- Closed in shoes and a hat must be worn at all times
- Respect male and female areas. Enter no room other than your own
- Respect the natural environment. Please use the bins provided and do not damage the bush.
- No pocket knives, glass, or valuables please
- All accidents/damage to equipment must be reported. Wilful damage must be paid for by the individuals involved
- The food is plentiful, so please refrain from bringing lollies etc. No gum please.
- Respect others after lights out. There should be no need to leave your cabin after lights out
- Every group is responsible for the ongoing cleanliness of their rooms.
- Do not tamper with Fire Fighting equipment. Damage will incur a minimum charge to the individual of $280.
- Do not enter out of bounds areas detailed upon arrival
- Drink water only from the identified tank & carry a water bottle filled before each activity
- Please do not run around the campsite
- Fires are to be by instructors only in designated camp fire areas
- Swimming is only allowed when supervision is provided by an appropriately qualified person
- Activities are only to be accessed during allocated activity time

GEAR CHECKLIST:

- Sleeping bag and pillow
- Water Bottle
- Raincoat (regardless of forecast)
- Hat
- Sunscreen
- Day Pack (small back pack for day walks etc.)
- Torch
- Toiletries
- Insect Repellent
- Towels (2)
- Camera (optional)
- Sturdy closed in shoes
- 2nd OLD pair of closed in shoes or sandals for kayaking etc. NO THONGS
- Thongs / sandals are not appropriate camp footwear - closed in shoes must be worn at all times
- T-Shirts - NO SINGLETs
- Shorts (suitable for harness wear)
- Underwear and socks
- Long pants (2 pairs)
- Jumpers / Jacket (2) (appropriate for season)
- Pyjamas
- Swimmers
- Garbage Bag for Wet / Dirty Clothes
- Souvenir money and coins for vending drink machines (optional)

NB: Please nametag all items and please ensure all medication is labelled clearly and passed onto the organising teacher

YMCA Camp Yarramundi & Deeimba
Camp Guidelines & Gear Checklist

We build strong PEOPLE strong FAMILIES strong COMMUNITIES