

# Excursion Information

Dear Parents and Carers,

The following details relate to an excursion to The Tops Camp which is being organised for Year 5 students. The purpose of this form is to provide a brief summary of the experience and provide all families with the opportunity to confirm your child's place for the camp through the payment of a small deposit. Once final numbers have been confirmed, you will receive an update with the final details.

<b>Name of Excursion</b>	Year 5 Camp – The Tops
<b>Purpose/Information</b>	Students will have the opportunity to participate in fun activities and challenges related to teamwork, independence, and resilience.
<b>Date</b>	Monday, 31 August 2026 – Wednesday, 2 September 2026 (Term 3 Week 7 – 2 nights in total)
<b>Time</b>	7.30am departure on Monday 31 August 4.30pm return to school on Wednesday 02 September
<b>Transport</b>	Coach Transport – air conditioned, seat belt equipped.
<b>Venue/Location</b>	The Tops Conference Centre 51 Bendena Gardens Stanwell Tops, NSW, 2508.
<b>Activities</b>	Will be confirmed closer to the date but may include; <ul style="list-style-type: none"> <li>- Cart racing</li> <li>- Vertical cluster</li> <li>- Giant swing</li> <li>- Leap of Faith</li> <li>- Abseiling</li> <li>- Bottle Rockets (group game)</li> <li>- Night activities (disco, movie)</li> </ul>
<b>Teacher in Charge</b>	Matthew Garratt – Year 5 Executive Teacher
<b>Anticipated number of students</b>	Total Students: up to 98 Total Staff: 6
<b>Cost</b>	The final cost of the excursion will depend on the number of students attending, however, the <b>maximum</b> cost of the excursion will be \$527. This note is asking for a deposit of \$50 to secure your child's place on the camp. No Cash payments, Sentral Pay by EziDebit or Card (In person) are the only forms of payment
<b>Due Date</b>	Thursday, 2 April 2026 <b>* Notes may not be accepted after this date</b>
<b>Additional Information</b>	If your child requires <b>any prescribed medication or over the counter medication (ie. Hay fever, Pain relief)</b> during the school day or overnight/morning, please ask for and complete the <b>Medication Authorisation and Administration Record from the Front Office.</b>  The <i>Medication Authorisation and Administration Record</i> requires the authorisation and signature of your GP/medical practitioner, please ensure that this is completed in a timely manner.
<b>Staff Attending</b>	Matthew Garratt, Nicky Davies, Isobel Bakker, Jeremy Saleh, Lauren Morley, Nathaniel Woods + LSA

<b>Behavioural Expectations</b>	Students are expected to demonstrate our school PBL Behaviour Expectations of being a Safe, Respectful and Responsible Learner at all times.
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*The school has made every effort to keep cost for this excursion at a minimum level. If necessary, parents or students can confidentially discuss support to meet the cost of the excursion with the Business Manager or Principal.*

*Staff accompanying students on excursions will take all reasonable care while the students are in their charge to protect them from injury and to control and supervise their behaviour and activities. Parents should be aware that staff members are not responsible for injuries or damage to property which may occur on an excursion where, in all circumstances, staff have not been negligent. Parents should warn children of the risk to themselves, to others and to property, of impulsive, wilful or disobedient behaviour.*

Kind Regards,

Matthew Garratt  
SLC Years 5 and 6

# Excursion Permission Note

## Year 5 Camp – The Tops

I give permission for my child \_\_\_\_\_ in year 5 to attend the Amaroo excursion to **The Tops** on **Monday, 31 August to Wednesday, 2 September 2025** travelling by charter coach and other details as outlined in the Excursion Information for Parents (including contingency plans).

*I agree to my child participating in the activities associated with this excursion mentioned previously. I have discussed with my child the need for expected behaviour on this excursion. I authorise the school to make arrangements for the welfare of my child (including medical or surgical treatment) in an emergency and I agree to meet the associated costs. I have provided to the school all medical information relevant to my child attending this excursion.*

*I agree that my child will be under the authority of the school for the duration of the excursion and that the school is authorised to return my child to school or home at my expense if the school considers that circumstances warrant such action. I give permission for my child to travel by private car, driven by a staff member or parent, in an emergency. Parents/carers are responsible for ambulance costs outside the ACT.*

The **Medical Information and Consent Form** is required to be completed annually, at the start of the school year, and prior to the first excursion. Please update and inform the school of any changes in your child's medical details as they occur.

Are there any changes since you last completed the Medical Information and Consent form?

Yes                       No

*If yes, an updated **Medical Information and Consent Form** is required to be completed (available through the front office).*

Will your child require medication to be administered during the excursion (e.g. allergy medication, pain relief)?

Yes                       No

*If yes, please complete a **Medication Authorisation and Administration Record** (available through the front office).*

Is there any additional information you need to provide to support your child's participation in this excursion?

Yes                       No

**If yes, please provide these details:**

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Name of Parent/Carer: (please print) \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

# Payment Slip

## Year 5 Camp

I am paying the amount of \$50      Student Name: \_\_\_\_\_

**Please tick the box:**

I understand this is a deposit payment to secure my child's spot and future payment will be required

**Payment options (Please tick the preferred payment option):**

via Parent Portal / SentralPay (link via email)

EFTPOS at the school office

If you fill in this form, your personal information and that of your child will be collected and handled by the ACT Education Directorate (the Directorate). This information is necessary for us to manage student participation in excursions and support the welfare and safety of your child. If you do not consent to supply us with this information your child will be unable to participate in the excursion. Normally, we will not use or disclose this information for another purpose, without your consent, unless you would reasonably expect us to use or disclose the information for a related purpose. Normally we only share information with school staff and, where necessary, parents or volunteers assisting with the excursion to appropriately and effectively manage the excursion. The Directorate has a privacy policy that explains how we handle personal information, including how we handle privacy complaints. The policy is available on the Directorate's website ([education.act.gov.au](http://education.act.gov.au)) on the About Us page.

*The school has made every effort to keep costs for this event at a reasonable level. The school requests parents and carers to make a voluntary financial contribution towards meeting the cost of your child's participation in this event.*

*We have a student support and school equity fund, which can be used to provide financial assistance for students where parents are unable to make the requested contribution. If however, there is insufficient total funding available to meet the cost of the program/camp/excursion, regrettably we may not be able to proceed. Please contact the Business Manager or Principal if you would like financial assistance for your child/children.*