



EMU PLAINS PUBLIC SCHOOL

Emerald Street, Emu Plains NSW 2750

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YEAR 4 CAMP YARRAMUNDI



I understand that flying fox, archery, rock climbing, orienteering, the giant swing and initiatives are activities at the Year 4 camp. I give permission for my child

_____ of class _____ to participate in the following:

PLEASE SIGN (ticks and crosses are not acceptable)

- A. Flying Fox _____
- B. Archery _____
- C. Rock Climbing _____
- G. Low Ropes _____
- I. Cave Maze _____
- D. Orienteering _____
- E. The Giant Swing _____
- F. Initiatives _____
- H. Bush Craft _____

N.B. If there is no signature next to option(s) your child will not be allowed to participate in the activity

My child **DOES / DOES NOT** suffer with travel sickness. Dosage and times for administering will be written on the accompanying medical form.

DIETARY NEEDS OF MY CHILD ARE: _____

I DO / DO NOT give my child permission to be filmed while at camp.

Parent/Caregiver: _____ Date: _____

Parent/Caregiver: _____ Date: _____