



Bayfield
HIGH SCHOOL

Shore Street, Dunedin, 9013, New Zealand
Telephone +64 3 455 0113
Facsimile +64 3 455 0256
Email bayfield@bayfield-high.school.nz
Website www.bayfield-high.school.nz

Tuesday, 2nd February

Dear Parents and Caregivers,

The Year 9 camps will take place at various venues around the Otago Peninsula during Week 3 of Term 1. Each camp will be over two consecutive days beginning on the following dates:

Learning Team	Start date
9 Pohutukawa	Sunday 14 th February
9 Totara	Monday 15 th February
9 Kowhai	Tuesday 16 th February
9 Manuka	Wednesday 17 th February
9 Rimu	Thursday 18 th February

Students will depart from the carpark near the Gymnasium at 8:30am, so please ensure they are there ahead of time to pack their gear into the van. Students will return from camp at approximately 3:30pm and will be available for collection in the same carpark by the gymnasium. Please try to drop students off by Musselburgh Rise Park as the school carpark is quite busy with current construction operations.

The focus of this programme is for students to have a closer look at our school RISE values from within their own Learning Teams, and to get to know a little bit more about our local area and its history.

Students will overnight camp with their Learning Team. Each group will spend their first day on Quarantine Island learning about the local history where they will be visited by the BHS kapa haka group, and then spend the night on the island. The following day will be full of activities around the Otago Peninsula. These activities include an educational session at the Royal Albatross Centre and a tour of the Penguin Place – Conservation Reserve. The cost of this trip is \$130 per student which covers the cost of accommodation, meals (three), transportation (land and water), and the various activity fees. Attached is a gear list, medical information form and permission form.

We welcome the assistance of parents on either day and/or the overnight stay. If you are keen to help, please let us know. We require parent helpers to be police vetted so please read the page about Parental Assistance carefully and contact me ASAP.

Both medical and permission forms must be returned by **Friday, 5th February**. Full payment of \$130 must be made by the school day before your son/daughter departs for camp, unless otherwise arranged.

For further information please contact me at school by either phoning (03) 455 0113 or emailing osurline@bayfield-high.school.nz Please contact me if there are any financial concerns. Some special cases may receive a grant which covers up to 50% of the camp cost.

Thank you,

Oliver Surline
Junior Outdoor Education Coordinator
Bayfield High School

Bayfield High School Year 9 Camp

Gear List

*To ensure the safety of all students, each student **must** have the gear and clothing specified below. If obtaining any item presents you with difficulty please contact us, as we are able to assist. Please ensure the student's name is on all items listed below.*

- A packed lunch for Day One on Quarantine Island – All other food will be provided
- Water bottle (700ml-1L)
- Warm sleeping bag
- Pillow
- Personal First Aid kit: blisters, small cuts, insects, sunscreen, anti-histamine, etc.
- Torch
- Sturdy shoes for exploring Quarantine Island
- Warm clothing, as the island can be quite cold at night:**
 - warm jersey
 - warm pants (not jeans)
 - a waterproof jacket
 - beanie
- Pajamas
- Towels (swimming and showering)
- Personal toilet gear
- Playing Cards or games for down time
- Sun Hat
- Togs & towels (wetsuits are encouraged but not required)
- Day pack for activities on Day Two

Please use this list to check off items as you pack them.

Bayfield High School Year 9 Camp

Medical Information Form

Student's Name: _____ Learning Team: _____

Parent/Caregiver name: _____

Emergency Contact number: _____ (Day) _____ (Night)

Doctor's Name/Clinic: _____

Doctor's Contact Phone: _____

Personal and Medical Information

Swimming Ability: non-swimmer / fair / average / strong swimmer

Dietary Requirements: vegetarian / non-vegetarian / other _____

Anti-Tetanus Serum: current / not current

Medical Concerns: _____

Treatment: _____

All existing medical problems must be stated since camp staff do not have access to medical files held at school. A separate sheet can be used if necessary.

If tablets or other medication are needed, these must be appropriately named and handed in to the teacher in charge. Please list instructions here:

Asthma inhalers – two inhalers must be provided. One is to be retained by the student, and the other named spare to be handed in as above.

Signature of Parent / Caregiver _____ **Date:** _____

I HAVE READ AND AGREE TO THE CONDITIONS OUTLINED

Bayfield High School Year 9 Camp

Permission Form

Activity: Year 9 Camp: two days, one night on the Otago Peninsula per Learning Team

Dates: 14th-19th February

I give my permission for my daughter / son to participate in the above activity, and I agree that she / he should take part in such tasks or duties as may be required by the staff. I authorise the obtaining on my behalf of any medical assistance or other assistance if, in the opinion of the staff, such assistance is necessary, and agree to meet any costs thus incurred.

Should my daughter / son be involved in a serious disciplinary problem, I accept that she / he may be sent home at my expense.

I agree that in the case of an emergency at home that requires the return home of my daughter / son, I shall consult with the Principal and be prepared to make every reasonable effort to assist in such a request.

To the best of my knowledge, my daughter / son has no medical or physical disability not already mentioned that is likely to prove detrimental to her / him or others on this activity.

I have checked that my **daughter / son has all the appropriate clothing and equipment** as outlined on the gear list for the activity.

Name: _____

Signature: _____

This form is to be completed and returned to the Student Office by **Friday, 5th February (Week 1)**

**Bayfield High School Year 9 Camp
Parental Assistance Form**

Parent/Caregiver's name: _____

Son/daughter's name _____ Learning Team: _____

Contact Details: Phone: _____ Cell: _____

Email: _____

I would be interested in staying overnight at Quarantine Island as a parent assistant on this night:

- Sunday, 14th February Monday, 15th February Tuesday, 16th February
 Wednesday, 17th February Thursday, 18th February

I would be interested in helping on:

- Day One of my son/daughter's camp on Quarantine Island, but I have made my own transportation arrangements to leave the Island.
 Day Two of my son/daughter's camp on the Otago Peninsula.

Please list any special skills you may have:

Finally, just to ensure the police vetting has time to be processed, please email me now at osurline@bayfield-high.school.nz so I can email you a Police Vetting form for you to complete.

Please return this form with the Medical Information and Permission forms to the Student Office.