



East Hills Boys High School

Lucas Rd Panania 2213
Phone 9773 7806
Fax 9792 3849
easthillsb-h.school@det.nsw.edu.au

Dear Parents/Guardians,

We are presently in the process of organising Year 11 Camp for Term 4. Currently, all students in Year 11 are invited to attend this camp at the Tops Conference Centre 30 October 2024 – 1 November 2024. This is a great opportunity for students to strengthen peer relationships and to experience activities that focus on team building, collaboration and cooperation by engaging in outdoor adventure style activities.

The camp will take place over three days and will require a great deal of organisation to ensure all staff and students are provided with a safe working/learning environment at the camp. Staff from East Hills Boys HS will work alongside camp supervisors to ensure our boys have a great experience. To provide a happy and safe learning environment at the camp a Risk Management Plan will need to be developed to support staff and students. Students who have displayed inappropriate behaviour at school may not be offered the opportunity to attend camp as they could possibly compromise the learning opportunities for other students. This is not the desired outcome for our school but a necessary one.

Therefore, we would like to work with families to ensure they have an understanding that they can assist their student in the term leading up to the camp by supporting the school to manage our students' behaviour expectations. Your co-operation in working with the school will play a key role in your son receiving an invitation to camp. Working together will ensure all students have an opportunity to have a great time at camp.

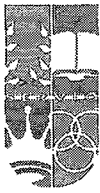
Please ensure the Medical and Consent Forms are completed online, and all money paid by the dates indicated.

DATE: Wednesday 30 October 2024 to Friday 1 November 2024
VENUE: The Tops Conference Centre, Stanwell Tops
COST: \$450 (which includes all meals, accommodation and transport).
DEPARTURE: At school by 8:30am to depart at 9:00am on Wednesday 30 October 2024
RETURN: To school by 3pm on 1 November 2024
DEPOSIT: Your Non-Refundable deposit of \$150 is due by Wednesday 18 September 2024.

Regards,

Julka Djokic
Year 11 Year Adviser

Making learning our number one priority



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Dear Parent/Caregiver

An excursion has been organised for your son/ward to attend Year 11 Camp. This excursion has been planned to strengthen peer relationships and to experience activities that focus on team building, collaboration, and cooperation by engaging in outdoor adventure style activities.

Date:	Wednesday 30 October 2024 – Friday 1 November 2024
Times:	At school by 8:30am to depart at 9:00am on 30 October 2024 Return: To school by 3pm on 1 November 2024
Venue:	The Tops Conference Centre, Stanwell Tops
Cost:	\$450 (which includes all meals, accommodation and transport).
Travel (Bus/train/make their own way/car)	Coach
Staff member/s with emergency care training	Miss Djokic
Students will need to bring	List of what to bring is attached
Food	Food will be supplied by the camp
Clothing	Appropriate camp attire

Excursion Coordinator

Head Teacher

Principal

Please sign, detach and return note and payment to the office by 18/9/24
Money will not be taken without the permission note. Late payment and permission notes will not be accepted.
Please check the EHBH Facebook page if you think the excursion could be cancelled



I consent to my son/ward of Year 11 participating in camp to The Tops Conference Centre, Stanwell Tops on Wednesday 30 October 2024 to Friday 1 November 2024. The excursion coordinator is Miss Djokic.	
I give permission for my son/ward to receive medical treatment in case of emergency: Yes / No	
I give permission for photographs of my son/ward taken on the excursion, to be used in promotion of the school or in the school newsletter. Yes / No	
My son/ward has the following medical condition/allergies.....	
Does your son/ward require regular medication?	Yes / No
If your son/ward requires regular medication, please advise medication and dosage.....	
Does your child have any dietary requirements?	

Parent/caregiver's signature: Date: Contact phone number:.....

PAYMENT METHOD

Payment of \$ _____; Due By: / /	<input type="checkbox"/> PAID BY INSTALLMENTS <input type="checkbox"/> PAID IN FULL	CASH Enclosed \$:	CHEQUE	ONLINE PAYMENT Receipt #:
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NOTE: No refund will be given if your child is unable to attend on the day.

Please return to the front office ASAP