



TRINITY CATHOLIC COLLEGE GOULBURN

DAY ZERO STEM CAMP 2017

I give permission for my child _____ **(child's name)** to attend the Day Zero STEM Camp being held at Trinity Catholic College from 28th – 30th September 2017. My child and I understand and agree to the following:

For Students:

I, _____ **(child's name)** understand that, while at the Camp at Trinity Catholic College, Goulburn I will behave according to the three rule expectations of the College.

I agree to participate in all activities and follow the instructions of Day Zero STEM Camp staff and adhere to rules at all times.

I also understand that if I do not follow the Camp rules, my parents/carers will be called, day or night, and I may be excluded from activities and/or will be sent home.

Student Signature: _____ Date: _____

For Parents/Carers:

I am aware of the consequences of my child not following the rules expressed in this letter.

I understand that any breakages/damage to College property will be charged against the person responsible and that the Principal from my school will be contacted.

I understand my child must comply with all directions given by the Camp staff while on Camp and follow the behaviour expectations provided. Poor behaviour will be reported to the respective Principal.

I understand the Camp Supervisor; Mrs Appleby will seek medical treatment for a student who is ill and may call an ambulance if required.

The Camp Supervisor acknowledges that this agreement does not exclude the general law obligation of the College during the Camp to use all reasonable care in relation to the student.

Parent/Carer Signature: _____

Date: _____