Proforma Camps and Excursions Parent/Carer Consent Form

Parent/Carer Camp Consent

Name of School: Mullauna College

Title of Camp: Year 7 Orientation Camp – Camp Toolangi **Date(s):** Thursday 19 February – Friday 20 February 2026

Educational purpose of the program:
The Year 7 Camp is an important part of your child's transition to secondary school. The theme of the camp is **TEAMWORK**. Students will work on a number of activities within a team environment. The aim of the camp is to build their confidence, leadership and communication skills whilst making new friendships in a positive and supportive environment. The program includes activities such as group challenges, walks and much more.

Details of supervising staff:
Teacher in Charge: Flora Moraitis (Head of Junior School)

Costs:
The cost of the activity is **$290** per student. **This will be paid via Compass from October 2025 once you have access to Compass.**
Payment is to be received by **Friday, 28 November 2025** to secure your child's attendance at this activity.
For a confidential discussion about financial support options, or if you would like to discuss alternative payment arrangements, please contact:
Laura Steele, Accounts Receivable
Ph: 03 9874 3422 | Email: laura.steel2@education.vic.gov.au

Refunds
Where a refund payment is applicable, requests are subject to discretion of the school and made on a case-by-case basis. Refunds will be provided where the school deems it is reasonable and fair to do so, taking into consideration whether or not a non-refundable cost has already been incurred by the school, the Department's Parent Payment Policy, Financial Help for Families Policy and any other relevant information.

Name and contact details of the 24-hour school emergency contact:
Camp Toolangi **– 5962 9219**

Departure details
Thursday 19 February, 8:45 am, to meet at the College Performing Arts Centre (PAC).

Return details
Friday 20 February, 3:00pm at the front of the school. Parents will be notified via Compass of any changes.

Distance from expert medical care:
Doctor – 19 Whittlesea Kinglake Road – 16.4 kms
Hospital – Maroondah Hospital – 49.8 kms

Accommodation arrangements:
Camp Toolangi has cabins.

Travel arrangements:
Students will be transported by a private bus company.

Adventure activities to be undertaken or that may be offered to students throughout the program:
Activities are to be confirmed but may include flying fox, possum glider, canoeing, raft building, abseiling, damper making, high ropes course, hut building, obstacle course and climbing tower.

Activities within this program present the potential for students to sustain physical injury. The following procedures will be implemented – along with other strategies – to manage the potential risks in the program.
These activities are organised and run by Camp Toolangi and their trained professionals. All activities are assisted by camp staff and school staff.

A risk management plan for this program has been developed by staff and is available for parents to review on request.
Attachments
Daily itinerary (will be available at a later date)
Clothing list (is available on transition website)

Student behaviour
'I understand that in the event of my child's misbehaviour or behaviour that poses a danger to himself/herself or others during the excursion, he/she may be sent home. I further understand that in such circumstances I will be informed and that any costs associated with his/her return will be my responsibility.'

Parent Signature: _____ Date:

Student Signature: _____ Date:

Cancellations or Alterations
'I understand that the principal may need to cancel or alter excursion arrangements at short notice, for safety reasons or due to circumstances beyond the control of the school, and while the principal will try to minimise inconvenience or financial losses to parents, these may be unavoidable.'

Student accident insurance and ambulance cover
The Department of Education does not provide student accident insurance or ambulance cover. Parents may wish to obtain student accident insurance from a commercial insurer and/or ambulance cover, depending on their health insurance arrangements and any other personal considerations.

Parent/Carer consent

I have read all the above information provided by the school in relation to the **Year 7 Camp - Toolangi**, including any attached material.

I give permission for my child (full name) _____ to attend.

Parent/carer (full name): _____

Parent/carer_(signature): _____ Date: _____

In case of emergency, I can be contacted on:

Business Hours: _____ OR After Hours: _____

Confidential Medical Information Form – Camps and Overseas Excursions

This form is to be completed by a parent/carer prior to their child going on a camp (overnight excursion) or overseas excursion. The information on this form will be useful if your child requires medical assistance while on a camp or overseas excursion. It includes information that is likely to be asked during an initial medical assessment and that may be required to inform a decision about medical care. All information is held in confidence. The information on this form must be current at the time of the overseas or overnight excursion.

Student illness
Parents/carers are responsible for all medical costs if a student becomes ill or injured on a school approved excursion unless it is found that the illness or injury was caused by the Department of Education and Training failing to discharge its duty of care.

I understand that in the event excursion staff determine it is necessary for my child to be sent home early due to illness, any cost associated with his/her return will be my responsibility.

Title of Camp: **Year 7 Orientation Camp – Camp Toolangi**

Date(s): **Thursday 19 February - Friday 20 February 2026**

Student's full name:

Student's address:

Postcode:

Date of birth: Year level:

Parent/carer's full name:

Emergency telephone numbers: A*fter hours* *Business hours*

Name of person to contact in an emergency (**if different from the parent/guardian**):

Emergency telephone numbers: *After hours* *Business hours*

Name of Family Doctor:

Address of Family Doctor:

Phone Number:

Medicare number:

*MedicAlert number (if relevant):

Medical/hospital insurance fund:	Member number:

Ambulance subscriber? ☐ Yes ☐ No If yes, Ambulance number:

Is this the first time your child has been away from home? ☐ Yes ☐ No

Swimming Ability
Please tick the description that best describes your child's swimming ability.

☐ **Beginner swimmer** –my child has little or no experience including in shallow water. My child is not a confident swimmer or comfortable in the water.

☐ **Average swimmer** – my child is able to swim 25 metres but is not strong or confident in deep or fast water.

☐ **Strong swimmer** – my child is able to swim 50 to 100 metres and is strong and confident including in deep or fast water.

Medical History

Please tick if your child is living with any of the following health conditions:

☐ Asthma (if ticked complete Asthma Management Plan)

☐ Anaphylaxis (if ticked review and update the Individual Management Plan)

☐ Bed wetting	☐ Blackouts	☐ Diabetes
☐ Dizzy spells	☐ Migraine	☐ Heart condition
☐ Sleepwalking	☐ Travel sickness	☐ Seizure of any type

☐ Other (include any other diagnosed medical or mental health condition:

Please also attach any relevant documentation and list below, for example, letter from treating practitioner, Student Health Support Plan, General Medical Advice Form or any other information that might be applicable.

Allergies
Please tick if your child is allergic to any of the following:

☐ Penicillin ☐ Other Drugs: _____

☐ Foods: _____

(Camp Toolangi has provided a 'Parent Information Guide for Catering for People with Dietary Requirement's, this is available at the end of this document.)

☐ Other allergies: _____

What special care is recommended for these allergies?_____

_____

Year of last tetanus immunisation:_____
(Tetanus immunisation is normally given at five years of age (as Triple Antigen or CDT) and at fifteen years of age (as ADT))

Surgical History

Has your child had any past or upcoming surgeries?

☐ Yes ☐ No

If yes, please provide more information including age of child at the time of surgery, nature of surgery:

_____

_____

_____

Medication

Is your child taking any medicine(s)? ☐ Yes ☐ No

If yes, provide the name of medication, dose and describe when and how it is to be taken.

_____

_____

All medication must be given to the teacher-in-charge. All containers must be labelled with your child's name, the dose to be taken as well as when and how it should be taken. The medications will be kept by the staff and distributed as required. Inform the teacher-in-charge if it is necessary or appropriate for your child to carry their medication (for example, asthma puffers or insulin for diabetes). A child can only carry medication with the knowledge and approval of both the teacher-in-charge and yourself.

Further Information

Is there anything else about your child's health and wellbeing or medical history that is important for us to know?

_____

_____

_____

_____

Medical consent

If there is a situation or incident which requires first aid to be administered to your child, school staff will administer first aid that is reasonably necessary and appropriate to their level of training. School staff will also seek emergency medical attention for your child if it is considered reasonably necessary. In the event that your child needs medical attention during the excursions, school staff will contact you as soon as practically possible.

Privacy Statement

We collect personal and health information to plan for and support the health care needs of our students. Information collected will be used and disclosed in accordance with the Department of Education and Training's privacy policy which applies to all government schools (available at: http://www.education.vic.gov.au/Pages/schoolsprivacypolicy.aspx) and the law.

I declare that all information provided is current and accurate:

Names of parent/carer: _____

Signature of parent/carer: _____

Date: _____

*MedicAlert is a 24/7 international emergency response service that shares your vital information directly to those who need it.

The Department of Education and Training requires this consent to be signed for all students who will be attending government school overseas or overnight excursions.

Note: You should receive detailed information about the overseas or overnight excursion prior to your child's participation and a Parent Consent form. If you have further questions, contact the school before the program starts.

About Camp Toolangi

Catering for Dietary Requirements with Care

We understand that dietary requirements can be for many reasons including serious medical, religious, and ethical. Our dedicated catering team handles all dietary requirements with care and attention to detail. Pre camp we ensure open communication with families/individuals regarding dietary needs so we can design specialised menus to meet each individual's needs.

CATERING FOR PEOPLE WITH DIETARY REQUIREMENTS

PARENT INFORMATION GUIDE

PURPOSE

At Camp Toolangi, we understand that catering for people with dietary requirements is an essential part of our catering service. We believe that in order to successfully cater for people with special dietary requirements education, information, communication, and safe food handling practises are a priority.

BACKGROUND

Dietary requirements could be for religious, lifestyle or medical reasons – whichever the case they should be treated with respect and understanding.

Allergic reactions can be serious and in the worst-case scenario life threatening. Camp Toolangi understands that each person can be different with what they can and can't eat and flexibility is required to meet each individual's needs.

PROCEDURE

It is the responsibility of school staff to ensure all information regarding dietary requirements is submitted to the camp no later than 2 weeks prior to the camp. Receiving this information from schools early is vital to our catering team to ensure we have adequate time to prepare our menus and source all supplementary items that might be required.

Camp Toolangi will provide all schools with our dietary requirements form to ensure this information is communicated.

If an individual's dietary requirement information is not provided to the school or received by Camp Toolangi prior to arrival every effort will be made by camp staff to cater for the individual however no guarantees can be made.

Parents or individuals are requested to be very specific when providing the details regarding dietary requirements to your school. For example - Allergic to whole peanuts but can have items marked with may contain traces of nuts - Allergic to raw and whole cooked egg but can have it cooked in muffins and cakes

Menu items may be altered slightly (when required) on the main camp menu to suit dietary requirements, for example gluten free pasta for coeliac, or soy ice cream for lactose free.

Camp Toolangi will make every effort to provide supplementary items as close to the original menu item as possible however for more complex dietary requirements this may not be possible and an alternative meal may be provided.

All individuals with dietary requirements will be served first at meals to ensure no cross-contamination.

It is the responsibility of the school staff to work with the Camp Toolangi catering team to ensure all individuals with dietary requirements receive the correct meals.

Camp Toolangi is a nut aware organisation and we do not stock whole nuts or items containing nuts however some of our menu items may contain ingredients that list "may contain traces of nuts" or "manufactured on machinery that may contain traces of nuts" by the manufacture.

DIETARY REQUIREMENTS

The following form is to be completed by the **parent / carer**

Before completing this form, please read the document shown above, 'Catering for people with dietary requirements – Parent Information guide', provided by Camp Toolangi.

Year 7 Camp - Toolangi

This form is to be completed by the **parent / carer**

STUDENT NAME: _____ **FORM:** _____

DIETARY REQUIREMENTS

Before completing this form, please read the document 'Catering for people with dietary requirements – Parent Information guide', provided by Camp Toolangi. When completing this form, please be specific with any dietary requirements, **including whether it is okay to use packages that state – 'may contain traces of'.**

Does your child have any life threatening (anaphylactic) allergies? **YES:** _____ **NO:** _____

If **YES,** please outline below:

_____

_____

_____

Does your child have any non-life threatening allergies/food intolerances? **YES:** _____ **NO:** _____

If **YES,** please outline below:

_____

_____

_____

Does your child require any dietary restrictions (e.g. vegetarian, vegan, halal, etc)? **YES:** _____ **NO:** _____

If **YES,** please outline below:

_____

_____

_____

Parent / carer Signature: _____ **Date:** _____