



Pukeko Camp 2018 – Kauaeranga Valley Christian Camp, Thames

September 12, 2018

Dear Parents,

This year our students from Pukeko will be travelling to 'Kauaeranga Valley Christian Camp' (KVCC) situated approximately 10 mins out of Thames for their end of year camp from **Tuesday December 11 – Friday December 14**. More information can be found on their website www.kvcc.org.nz

Please be aware that Te Hokioi and Te Ohanga students will be away at camp during this time as well.

Medical / Consent Forms

Please find attached a Medical and Consent Form to be completed fully and returned to school by **the end of Term 3**. Alternatively, please feel free to contact us directly regarding any medical condition of which we need to be aware, if you prefer.

Although many of these details are already held by the school, it is essential that contact and emergency numbers, and medical information, is current.

Transport

Transport is being finalised but presently it is looking like we will be travelling by bus with one emergency vehicle. Therefore we will require parental help with the driving of an emergency vehicle. The official parental vehicle will be reimbursed for their travel expenses. Please fill out the camp parent form below if you are able to help with transport.

Camp Parents

Dependent upon final numbers attending Camp, we will require about 10 parents to accompany the group for the four days. If you are prepared to act as a Camp Parent **and become fully involved in all aspects of the Camp Programme**, please complete the slip below and **return it to school by Friday 28 September**. Should we receive more offers from parents than required, preference will be given to those parents who have not had the opportunity to be involved in an Oropi School camp in recent years.

Pukeko Camp 2018 – KVCC Thames – Camp Parent Form

- I am prepared to accompany Pukeko to KVCC for the four days.
- I am prepared to take my car to camp as the emergency vehicle
- I have the following skills which may be of benefit during the Camp:

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.....

.....

Name

Contact

Accommodation

KVCC facilities include an equipped kitchen, dining room, hall, bunkrooms, games room, toilets and showers, a gymnasium and areas for outdoor games and recreational activities.

Meals

Children will require their own lunch, drink, and sufficient food for morning tea on the first day.

All main meals will be provided by the camp organisers.

Each family is asked to supply one substantial quantity of home baking to supplement morning and afternoon teas for the four days.

Camp Fees

The cost for the camp is set at **\$195.00** each (per child and per adult) and covers:

- Bus hire
- Fuel Costs (petrol and Emergency Vehicle)
- Accommodation
- Camp Activity Programme
- Meals

The Board of Trustees has subsidised each child \$70, which has already been taken off the final costings. We acknowledge that the camp cost is more expensive than previous years, but please be aware that this is a 3 night camp and equates to around \$65 per night. Camps across the nation have increased their pricing over the last 12 months. We have tried to keep the cost as low as possible.

We would appreciate the Camp Fee being paid **by Friday 7 December** for which a receipt will be issued.

Cheques may be made payable to Oropi School.

Payment can also be made via internet banking Account Number: 123440-0087772-00. Please make sure you use 'PUKEKO CAMP' as the reference.

Should this request present any difficulties, please do not hesitate to contact us or the office over the next few days so that alternative payment arrangements can be made.

Thank you for your support

Kind regards

Josie Pullenger josie@oropi.school.nz
& Mel Haenga mel@oropi.school.nz

MEDICAL / CONSENT FORM

Kauaeranga Valley Christian Camp (KVCC) Thames 2018

Student Name: _____

Address of Parent / Caregiver: _____

Telephone: **Private:** _____ **Mobile:** _____

Business: _____

Emergency Contact: _____

Phone: _____

I approve of my child attending Pukeko camp at Kauaeranga Valley Christian Camp from December 11th – 14th 2018.

In the event of accident or illness, I authorise the obtaining of such medical assistance as may be required

I agree to reimburse the school for any expense incurred in providing medical assistance for my child

Signed: _____ **(Legal Guardian)**

My child **has / has not** had a recent Tetanus Injection. (Delete as appropriate)

Please indicate any Medical or other condition of which Teachers / Parents should be aware:

Condition	Medication Required
Travel Sickness: Yes / No	

Family Doctor: _____

Phone: _____

Information involving any problem, condition or concern not outlined above, may be supplied by email, letter, or phone call and will be treated as strictly confidential.

Signature: _____ **(Legal Guardian)**

Date: _____