Dear Parent/Caregivers,

The beginning of 2015 marks another important phase in the Academy's history. This is when the Academy family embraces a new cohort of Year 10 students. In order to provide a unique induction experience, we invite your child to attend our three day Academy orientation program, to be held at the Kindilan Outdoor Education Centre at Redland Bay.

The program will involve all members of the Year 10 cohort and the Year 11 House Managers, who will play an important leadership role in the facilitation of the program. While many of the activities will involve an outdoor education style delivery, the focus will be on building a close Academy community based on our Character Ideals of Honesty and Trustworthiness, Respect, Responsibility and Understanding, Tolerance and Inclusion. Together we will also focus on a range of visioning, resilience, team building and creative endeavours, delivered in a healthy natural environment. The program will be similar to that of a traditional camp but will have a specific Academy point of difference. It is designed to ensure your child will be well prepared and supported in achieving his or her goals in 2015 and beyond.

Please note details below:

Venue: Kindilan Outdoor Education, cnr Days and German Church Roads, Redland Bay
(Ph: 07 3206 7291)

Date: Depart the Academy on Monday 2nd February at 9.30am and arrive back at the Academy at 2.00pm on Wednesday 4th February.

Cost: $298.00 (Payment details are included in the Fee Information Booklet).

To assist with planning procedures for the camp, the return of the information details overleaf (medical and nutritional information only) is required by Monday 10th November (payment due Tuesday 27th January, 2015).

If you wish to discuss this program further, please do not hesitate to contact Miss Marg Williams, at mwill378@eq.edu.au

We are thrilled to offer you this unique opportunity and look forward to your support of this event.

Yours faithfully,

Glen Donald
Acting Principal
ACADEMY INDUCTION PROGRAM 2015
at
Kindilan Outdoor Education Centre
Redland Bay
Monday 2 Feb – Wednesday 4 February

THINGS TO BRING

Below is a list of things you will need to bring to camp.

Sleeping Gear       -  Sheets, sleeping bag, pillow, pyjamas

Toiletries      -  insect repellent, sunscreen, shampoo
                 brush/comb, soap, toothbrush and toothpaste
                 towel, deodorant, thongs for shower etc.

Clothing      -  ENOUGH FOR 3 DAYS!
                 HAT – This is the first thing you must pack.
                 comfortable, sensible clothing – shorts, t-shirts, sweatshirts, jeans (please pack
                 clothing suitable for physical and messy activities)
                 modest swimwear and a spare pair of runners for wearing in the lake
                 1 pair of covered walking shoes for bush activities
                 thick socks

Other        -  tea towel
                 camera (optional – at your own risk)
                 torch
                 water bottle – 1 litre water bottle to be carried with you on all activities
                 Any decorative House themed clothing  (eg Red-Matjiin, Orange-Vivezza, Green-E’veiller)
# Medical History / Authority

<table>
<thead>
<tr>
<th>Student Name:</th>
<th>Date of Birth:</th>
<th>Year</th>
<th>Level:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Home Address:</td>
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</table>

## 1. Immunisations

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>Last Injection Date:</th>
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</thead>
<tbody>
<tr>
<td>Tetanus</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Hepatitis A</td>
<td></td>
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<tr>
<td>Hepatitis B</td>
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</tbody>
</table>

## 2. Conditions

Yes / No (if yes complete details)

<table>
<thead>
<tr>
<th>Medical Details</th>
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<tbody>
<tr>
<td>Asthma</td>
</tr>
<tr>
<td>Diabetes</td>
</tr>
<tr>
<td>ADHD</td>
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<tr>
<td>Other</td>
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</tbody>
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## 3. Allergies

Yes / No

<table>
<thead>
<tr>
<th>To What</th>
<th>Reaction / Treatment Details</th>
</tr>
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<tbody>
<tr>
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## 4. Current Injury / Condition

which may be affected by the excursion/camp/activities

Yes / No

Details
5. Medical Insurance Details

Medicare Number: ______________________ Name on Card: ______________________

Private Health Insurance Details:
_____________________________________________

6. Emergency Contact

<table>
<thead>
<tr>
<th>Name</th>
<th>Home Phone</th>
<th>Business Phone</th>
<th>Mobile</th>
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</table>

7. Administration of Paracetamol
Do you give permission for your son/daughter to be administered with this medication, in strict accordance with manufacturers instructions and recommendations, by the supervising teacher if required?

YES                  NO

8. Medical Authorisation
I authorise the teacher to obtain medical assistance if deemed necessary, should an accident occur or an illness befall the above student, and agree to pay all medical / pharmaceutical costs incurred on their behalf, noting the school's subscription to the ambulance.

YES                  NO

9. Dietary Requirements
Please list any special dietary requirements or food allergies the above student may have.

____________________________________________________________________________
____________________________________________________________________________

10. Permission to swim
I give permission for my child to swim in the lake (while building a raft and participating in canoeing activities).

YES                  NO

Parent/Guardian Signature: ________________________ Date: ____________________