

Teacher Duties

Duties of Camp Leaders/Teachers in Charge

- Liaise with camp staff prior to and during the camp.
- Make sure the location of a phone, hospital and emergency services is known.
- Make sure time is available for student reflection, discussion and writing in journals.
- Be proactive where safety of students and staff are concerned. Ensure that the specific safety requirements defined for each outdoor recreation activity are adhered to.
- Ensure that students are instructed to use adequate sun protection and a minimum impact environmental code is adopted.
- Oversee all camp activities.
- Keep school informed of any unexpected delays in return to allow families to be informed of the late return.
- Distribute and collect student and staff evaluation forms.

Duties of the Teacher on Camp

- Teachers are responsible for the group of students allocated to them whilst on camp.
- Teachers need to be aware of and cater for any special needs of children in their care.
- Work with and support camp leaders in achieving the aims of the camp.
- Teachers are expected to work with specialist providers, accompanying their groups to all activities, being actively involved wherever possible.
- Be prompt in regards to supervision as part of the supervision roster.
- Mark rolls on departure so that any missing students can be quickly identified and followed up prior to departure.
- Make sure students fasten seatbelts when travelling by bus.
- Be proactive in terms of safety of students and staff.
- Make time for, and assist students with, camp journals.
- Make sure student evaluations are filled out before leaving camp – return camp leaders.

Teacher Consent Form

Camp Agreement:

I agree to my attendance at the below mentioned program.

Hunter School of Performing Arts Yr.11 PDHPE Program 24-26 September 2018

As a teacher I understand that Barrington Outdoor Adventure Centre and its instructors will take reasonable care for the welfare and safety of those attending the camp but are not responsible for any accident or sickness otherwise occurring. I acknowledge that going on camp may involve my participation in activities of a hazardous nature, though Barrington Outdoor Adventure Centre and its instructors will take reasonable care to minimise risk to participants.

I have detailed herein and on any attached pages any disabilities or susceptibilities affecting myself that may place me at greater than normal risk. I authorise Barrington Outdoor Adventure Centre and its instructors to obtain medical assistance and ambulance transportation in the event of illness or injury as they think necessary and authorise qualified medical practitioners to administer anaesthetic, blood transfusions or any other procedures deemed necessary. I also agree to pay all the cost of any expenses incurred as a result of such medical assistance and ambulance transportation. I acknowledge that I am able to obtain private insurance cover for myself in respect of any accidents or sickness at the camp. Should I need to go home for any reason I will cover any associated costs.

I acknowledge that during camp I may be go swimming and I give my permission to do so.

I consent to attending camp on this understanding.

Privacy Statement:

Barrington Outdoor Adventure Centre will collect and store the information you voluntarily provide to enable processing of enrolment for programs/camps. The information will be provided to instructors/guides of the program and their supervisors, where necessary and you consent to this disclosure. Any information provided by you will be stored in a database that will only be accessed by authorised personnel and is subject to privacy restriction. The information will only be used for the purpose for which it was collected. Any information provided by you to Barrington Outdoor Adventure Centre can be accessed by you during standard office hours and updated in writing or by contacting us on (02) 6558 2093.

I also declare that I have read and understand the information within the Teacher Information Pack/Guidelines and will read the gear checklist for my safe participation and will ensure I bring all items listed.

I also understand that it is a condition of participation to accurately complete the following medical forms.

Media Consent:

I agree to allow Barrington Outdoor Adventure Centre to use any photographs or video taken of me at this program for the promotion of its services through promotional DVD or on BOAC websites.

Teachers Name

Teachers Signature

Date