



Invoice No:

GOLDFIELDS CAMP SCHOOL

Booking Confirmation Form - Day Program

“DISCOVERING OUR TOWN—KALGOORLIE”

1. This form is to be completed in full by the teacher in charge. (The actual person who will be working with us).
2. The Principal signs off on the request. This tells us that the school supports the request and that the school is responsible for bringing certain items and for a standard of behaviour.

SCHOOL /GROUP NAME					
ADDRESS					
PHONE NUMBER					
SCHOOL ABN					
GROUP LEADER					
MOBILE PHONE NUMBER					
EMAIL ADDRESS					
ADDITIONAL GROUP CONTACT (NAME AND MOBILE NUMBER)					
DATE OF ARRIVAL:			DATE OF DEPARTURE:		
TIME OF ARRIVAL: 7:30am			TIME OF DEPARTURE: 3:15pm		
GROUP DETAILS	STUDENTS		ADULTS		
	M:	F:	M:	F:	
STUDENT DETAILS	AGE:		SCHOOL YEAR:		

While camp school staff may lead activities during the camp, the supervision of students at all times while at the Goldfields Camp School is the booking schools' responsibility. The school appoints a Teacher in Charge to act as the authority whilst on camp. The Teacher in Charge needs to tick the boxes below and is responsible for:

- Liaising with the Camp School staff to organise the Day Program.
- Ensure all camp participants treat all camp school staff with courtesy and respect.
- Ensure all students are supervised at all times.
- The carry and administration of school-supplied first aid kit.

In signing, the Principal supports this request and supports the Camp Schools philosophy. Please call the Manager, Ray Foxon, personally should you have any queries.

Principal's Name: _____

Principal's Endorsement: _____

Email this form to:
Goldfields.CS@education.wa.edu.au