



Year 6 Camp Norval House & Lodge

<i>Date note distributed:</i>	Friday 28 th July 2017
<i>To:</i>	Parents/Guardians Year 6 Students
<i>Date & Time of event:</i>	Monday 27th November – Friday 1st December
<i>Cost:</i>	\$560.00 – Deposit \$200.00 & Balance \$360.00
<i>You can find the QKR charge in the:</i>	Year Level tab
<i>Response Required: YES/NO</i>	YES (return to classroom teacher)
<i>Return form & payment due by:</i>	Form returned & deposit paid by Friday 11 th August Final payment due by Friday 10 th November
<i>Staff member in charge & e-mail addresses:</i>	Marcus Mooney mooney.marcus.d@edumail.vic.gov.au

This year, our Year 6 camp will be held at **Camp Norval**, which is located in Halls Gap within the spectacular Grampians National Park, approximately 250kms north-west of Melbourne. Camp Norval offers a wide range of adventure, team building and environmental activities. Our students will participate in a range of activities such as rock climbing, abseiling, bushwalking, canoeing, mountain biking, initiative activities, high ropes, archery and bush cooking.

OSPS uses an app called QKR! as our preferred payment method for accepting payments from parents. It is a quick and easy to download and learn. QKR! Payments are child specific – please ensure you have selected the correct child before finalising a payment. Please visit the OSPS website for instructions and further information

www.oakleighsouthps@vic.edu.au/tiqbiz-qkr



QKR website link www.qkr.mastercard.com/for-everyone-australia

Once you have completed your payment, please complete the permission note and return it to your classroom teacher. If you have any questions, please contact the school office on 9570 1016.



RETURN SLIP/ PERMISSION NOTE



I have used Qkr! (please tick the box).

Date of QKR! payment: _____

<i>Please circle:</i> I give permission for my child to participate in the Year 6 camp to Norval House & Lodge	YES / NO
<i>I also authorise the teacher in charge to give consent (where it is impracticable to communicate with me), to my child receiving medical, ambulance or surgical treatment as may be deemed necessary.</i>	
Student's name:	Grade
Parent / Guardian Signature:	Date
Emergency Contact Number:	Medicare Number: