

Camp Caroline 2019



Grade 7 Band Students

Feb. 13 -15

Grade 8 Band Students

Feb. 27 - Mar. 1

Revue Concert
Thurs. March 7 @ 7
pm

Information Forms will be sent home with the students. These forms will also be available on the school's website. **Please complete and return these permission forms as soon as possible. (please have any band fees paid as well)**

The parent information evening will be **Thurs. Jan. 31st at 7 pm** in the Senator Riley band room.

We are still in need of **parent chaperones**. Parent Volunteer packages will need to be completed. *(available in the school office)*

Please contact Mr. Froese if you can help out ☺

froeseh@fsd38.ab.ca

CAMP CAROLINE GRADE BAND CAMP
24 hour pay phone 1-403-722-9906

Grade 7 Camp Dates: Wednesday Feb. 13 to Friday Feb. 15, 2019

Our goal is to immerse the students in a very concentrated learning environment. The various instructors and clinicians will challenge each student to grow musically, to a degree not possible within the limited time found in the classroom situation.

**The results of our efforts can be heard at our
REVUE CONCERT,
Thurs. March 7th at 7:00 P.M.
(Senator Riley School Gym)**

Over the next 2 months, we will be busy preparing for this event. Every band student will need to learn the pieces thru diligent home practice, which compliments our class work.

Professional clinicians and a guest conductor will be hired to work with the students.

Band fees must be paid in order for students to participate in this exciting opportunity. These fees cover the cost of renting the facilities, rooms and meals, instructors and bus transportation.

You will also find information sheets, permission forms and an itinerary accompanying this letter.

On Thursday, Jan. 31st, 2019 at 7:00 p.m. in the ESRMS band room, I will be hosting the required Camp Caroline Trip information meeting. If you have any questions or concerns, I will have the answers. You can also e-mail me at froeseh@fsd38.ab.ca

The information/permission forms need to be signed, and any unpaid band fees submitted **by Thurs. Jan. 31st, 2019.**

Thank you,

Herb Froese
Senator Riley Band Director

**GRADE 7
CAMP CAROLINE ITINERARY
February 13 – February 15, 2019**

Wednesday, February 13

- 12:00 p.m. Meeting in gathering area
- 12:20 Load bus and depart for Camp Caroline
Scheduled restroom stop near Airdrie
(Tim Hortons)
- 4:00 Arrive at Camp Caroline
 - *unload all items*
 - *Welcome, Introductions*
 - *Briefing Info and Room Assignments*
- 5:30 **Supper**
- 6:30 *Woodwinds – Rehearsal in Aspen lounge*
Brass - Rehearsal in Creekside lodge
Percussion - TBA
- 8:00 Gym/Pool/Games Room organized Activities
- 9:30 **SNACK**
- 10:00 Prepare for bed
- 10:30 In rooms – lights out

Thursday, February 14

- 6:30 a.m. Pool open (optional activity)
- 8:30 **Breakfast of champions**
- 9:30 – 10:20 **CLINIC #1**
- Break
- 10:30 – 11:20 **CLINIC #2**
- 11:30 – 12:30 **CLINIC #3 (or rehearsal)**
- **12:30 – 1:00 Lunch**
- 1:00 – 3:00 **Rehearsal**
- 3:00 - 5:00 **Free Time**
- 5:30 **Supper**
- 6:30 **Rehearsal #2**
- 8:00 **Talent Show (come prepared to participate)**
- 9:30 **Snack**

- 10:00 Get ready for bed
- 10:30 Lights out

Friday, February 15

- 6:30 a.m. Pool open (optional)
- 8:30 **Breakfast**
- 9:00 **CLEAN ROOMS / PACK/ VACUUM**

- 10:00 **Rehearsal**

- 12:00 **Lunch**
- 1:00 p.m. Load buses
Departure
- 4:00 Arrive at Senator Riley School
Unload Buses and return equipment to
the band room

2019 Camp Caroline Packing list

- ✓ Instrument and Music
- ✓ Sleeping bag and pillow
- ✓ Towel
- ✓ Toothpaste/brush, soap, comb, shampoo
- ✓ Swim wear
- ✓ 2 days of clothing
- ✓ Slippers
- ✓ Indoor and outdoor footwear
- ✓ Winter hat and gloves etc.
- ✓ Optional: money for candy shop
 - Cell phone, I-pad

Chaperones

Duties and Responsibilities

- Read student profiles and familiarize yourself with the students under your care. (Allergies, meds, dietary peculiarities etc.)
- You are the first line of contact to help them address situations
- Monitor their mental state

Support the Kids – Make them feel safe and welcome

Generally “keep a lid” on things – be around – be visible

Smile and Enjoy the Kids and yourselves

Select Activities you can help with

- Pool supervision
- Gym supervision
- Hiking
(upon arrival we will make a schedule with camp leader)
- “keeper of the keys”
- Hall Surveillance
- Evening Activities (camp/group games, talent show, fire place)
- Help out where you see a need

Thank you for making this camp possible 😊

MEDICAL INFORMATION FORM - FIELD TRIPS
(For Overnight and Out of Province Trips)

Trip Information

Description of Activity **Grade 7 Band Camp @ Camp Caroline** Activity Date: **February 13-15, 2019**

Student Information

Student Name: _____ Birthdate: _____ / _____ / _____
(YY) (MM) (DD)

Parent contact telephone # _____ (Home) _____ (Work)

Emergency contact #1 _____ (Name) _____ (Phone)

Emergency contact #2 _____ (Name) _____ (Phone)

Medical Information

Is your child presently under the care of a physician? If yes, please provide details.

Is your child currently taking any medications? If yes, please provide details.

Does your child have any known allergies? If yes, please provide details and required treatment.

Please list any dietary concerns or conditions that your child has.

Please list any other medical concerns that teachers should be aware of (ie bedwetting, sleepwalking, etc)

Please list any concerns or conditions not already identified that can influence your child's participation in this activity.

This is my/our permission for the teacher in charge, or their designate, to make arrangements for any necessary emergency medical attention in the event of serious illness or injury. If such attention is required, every effort will be made to notify the parent/guardian or emergency contact as quickly as possible.

Alberta Health Care Number (optional) _____

Date: _____ Signature of Parent/Guardian _____



Form 260-2

DIVISION INFORMED CONSENT/PERMISSION FORM (K-9)

École Senator Riley Middle School is arranging: a grade 7 band camp trip to Camp Caroline on February 13 to 15th, 2019. Fee for this trip is included in school fees. Please make payment or payment arrangements with the office if you have not already done so.

Parents must attend a mandatory meeting on Thursday, Thurs. Jan. 31st, 2019 in the SRS band room at 7:00 pm.

Transportation will be via FSD school bus.

THIS FORM MUST BE READ AND SIGNED BY A PARENT OR GUARDIAN OF EVERY STUDENT WHO CHOOSES TO PARTICIPATE. THIS FORM MUST BE COMPLETED AND RETURNED TO THE SCHOOL BY Jan. 31st, 2019.

(Date)

ELEMENTS OF RISK:

Educational activity programs involve certain elements of risk. Injuries may occur while participating in these activities. The following list includes, but is not limited to, examples of the types of injury or risks which may result from participating in Grade 7 Band camp.

(Describe activity)

- 1. Tripping
- 2. Injury due to motor vehicle accident
- 3. Falls
- 4. Twisted ankle while playing in gym

The risk of sustaining these types of injuries result from the nature of the activity and can occur without fault of either the student, or the school board, its' employees/agents or the facility where the activity is taking place. By choosing to take part in this activity, you are accepting the risk that you/your child may be injured.

The chance of an injury occurring can be reduced by carefully following instructions at all times while engaged in the activity.

If you choose to participate in the above referenced activity, you must understand that you bear the responsibility for any injury that may occur. Foothills School Division #38 has basic student accident insurance coverage in place as described more fully in the materials that were sent home at the commencement of the school year.

ACKNOWLEDGEMENT:

I HAVE READ THE ABOVE. I UNDERSTAND THAT BY PARTICIPATING IN THE ACTIVITY DESCRIBED ABOVE, I AM ASSUMING THE RISKS ASSOCIATED WITH DOING SO.

Signature of Parent/Guardian: _____ Date: _____

PERMISSION:

I give _____ permission to participate in the _____
(Students Name) (Describe Activity)

to be held on or about _____
(Date)

Signature of Parent/Guardian: _____ Date: _____

Grade 7

Form 260-7

INFORMED CONSENT/PERMISSION FORM FOR SWIMMING ACTIVITIES

DEFINITION:

In this form, the term "Swimming Activities" shall include all swimming areas, diving, water slides, hot tubs, saunas, steam rooms, and/or any other water related activities that may be accessed by the student while participating in an approved school activity or field trip on or about (date(s)) **Feb. 15-17, 2019**. Supervision will be by persons who may not have valid Life Guard certification.

ASSUMPTION OF RISKS:

Participation in the Swimming Activities carries with them certain inherent risks that cannot be eliminated regardless of the care taken to avoid injuries. The specific risks vary from one activity to another, but the risks range from:

- 1) Minor injuries such as scratches, bruises, and sprains
- 2) Major injuries such as burns, eye injury or loss of sight, joint or back injuries, heart attacks, and concussions
- 3) Catastrophic injuries such as paralysis, drowning and death.

The risk of sustaining these types of injuries result from the nature of the activity and can occur without fault of either the student, or the school board, its' employees/agents or the facility where the activity is taking place. By choosing to take part in Swimming Activities, you are accepting the risk that you/your child may be injured. The chance of an injury occurring can be reduced by carefully following instructions at all times while engaged in the activity. If you choose to participate in the above referenced Swimming Activities, you must understand that you bear the responsibility for any injury that may occur. Foothills School Division #38 has basic student accident insurance coverage in place as described more fully in the materials that were sent home at the commencement of the school year.

ACKNOWLEDGEMENT:

I/We have read the previous paragraphs and we know, understand, and appreciate these and other risks that are inherent in the Swimming Activities. We hereby assert that our child's participation is voluntary and that we knowingly assume all such risks.

DECLARATION OF SWIMMING ABILITIES AND MEDICAL CONDITIONS:

1) I/We hereby declare that our child has the following swimming abilities (eg. non-swimmer, beginner, capable swimmer, etc): _____

2) List most recent certification and level if applicable (eg. Red Cross Level 3) _____

3) Identify any medical conditions which could be compromised by pool use, or make pool use less safe for others (eg. infections, chlorine/chemical sensitivity, etc) _____

PERMISSION:

I/We give _____ permission to participate in the Swimming Activities
(Student's Name)

to be held on or about the following date(s) _____ in conjunction
with the _____

(Name of Field Trip)

Signature of Parent/Guardian: _____

Date: _____