



Expression of Interest Altitude Training Sports Camp - Thredbo

Please return to the school office by Friday 2nd November 2018

We are excited to be running the Altitude Training Camp in Thredbo again in 2019. This is an exciting opportunity for our students to immerse themselves in an elite environment of training and learning about high level sports performance. This camp is for Year 7 & 8 students only in 2019.

If your child is interested in participating in this experience, please return the following page.

PLEASE NOTE: There are limited positions, there will be trials if needed.

Successful candidates will be advised in November, 2018.

A look at what to expect:

- Training sessions: Swimming, Running, Core strength, Stretching, Self-recovery
- Activities: Trampolining, Rock climbing, Hike to the top of Mt Kosciuszko, Skateboarding, High ropes, Alpine Arrow Tag plus other activities.
- Lectures in Nutrition, Strength & conditioning and Sports psychology.
- Students will be designing and preparing their own meals, all within guideline of an Elite Athlete.

Date:	Tuesday 2 nd – Saturday 6 th April 2019
Times:	Leaving MCS Wednesday morning at 6am Returning MCS Saturday afternoon at 6pm
Cost:	\$350 This includes: - Four nights' accommodation at Wanders Ski Club - https://www.wanderersskiclub.com.au - All food (other than travelling down and back) - All activities – see above - Lift ticket (when hiking to Mt Kosciuszko) - All travels costs

If you have any questions, please do not hesitate to contact me,

Al Westbury	Deal
Director of Sport	Deputy Principal
Mr Alan Westbury	Mrs Tracey Deal





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Student's Name:	_ Year/class in 2018
 I am interested in my child attending the Altitude Training Camp. I have spoken with my child about his / her responsibilities. My child will be appropriately dressed following the MCS dress. I understand that all off-site activities involve an element of rist or more. On behalf of my child in signing this document, I activate under the terms of the Civil Liability Act 2002 (NSW) and teachers, officials and volunteers from liability to the extent period (A Risk Assessment has been completed for this event and merce and the event of injury or illness, I acknowledge that the school emergency situation, I authorise the school to obtain all necessant ambulance transport, medication and hospital accommodation fees and expenses. (A copy of your child's medical record applicate let us know promptly if there is any additional informate. I acknowledge that my signature on this permission slip gives in the nominated excursion. I agree to the student being the teacher in charge for the duration of the excursion and to the the student home at my expense if the circumstances warrant. I further acknowledge and understand the travelling arrang approve of them. 	sk that may result in accidental injury accept I have received a risk warning at I hereby release the school, its permitted under the terms of the Actional between the viewed by parents) will attempt to contact me, but in an essary medical assistance, including on, and I agree to pay for all related card will be taken on the excursion. (ion.) is my consent to my child taking part ander the care and authority of the eteacher being empowered to return to such action.
Parent name:Date:	_
Signature:	