



Westminster School

## DUKE OF EDINBURGH AWARD SCHEME

### Surf Education Program: Yorke Peninsula – Bronze or Silver (service/journey)

A 3 day surf program has been organised as part of the Duke of Edinburgh Award. The camp will be conducted at the Yorke Peninsula at locations including Berry Bay and Corny Point on **Friday 17 May to Sunday 19 May**.

The program is being conducted in conjunction with Surf Culture Australia and their qualified Surf Instructors. Students will learn surf techniques in a range of conditions, ocean awareness, surf rescue and environmental awareness. This program is targeted at students with little to no experience in surfing. The Yorke Peninsula has a range of options to suit different conditions and has some spectacular and pristine beaches. Students will be camping at the Corny Point Caravan Park on Friday and Saturday nights.

Transport will be by the Westminster Bus, leaving school (outside the Outdoor Education shed) at **7.30 a.m. Friday** and returning **Sunday at 5.00 p.m. approximately**.

<b>Date</b>	:	Friday 17 May (7.30am) – Sunday 19 May (5pm)
<b>Transport</b>	:	School Bus and trailer
<b>Staff</b>	:	Kara Lucas, Daniel McArthur and Surf Culture Instructors
<b>Cost</b>	:	\$250 to be added to school account.
<b>Food</b>	:	Students are to organise and provide their own food.
<b>Equipment</b>	:	Wetsuits and surf boards will be provided. Camping equipment will be provided by the school.

Any further enquiries regarding the trip, or the nature of activities, should be directed to Kara Lucas (8276 0258) [klucas@westminster.sa.edu.au](mailto:klucas@westminster.sa.edu.au)

In the event of an emergency, the contact person, whilst the students are away, will be Mr David Wallage (0407 962 639).

Please complete the permission and medical forms and return them to Kara Lucas at school.

Kind regards

Kara Lucas  
Outdoor Education Teacher



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## 3 Day Surf Program

### Session 1

#### INTRO

- AIM- To develop correct and efficient surfing skills , surf safety and rescue techniques
- RISK IDENTIFICATION-Venue Orientation, rips, rocks, beach access, other surfers
- ANALYSIS AND OBSERVATION- Current weather maps and reports and how they relate to our surfing location
- PERSONAL EQUIPMENT-Wetsuit Care

#### SURFING

- Appropriate warm up techniques, sun smart
- Correct and efficient paddling and prone to feet surfing techniques
- Skill evaluation by coaches to determine appropriate groups
- Dismounting

### Session 2 – Skill Building

#### INTRO

- Venue orientation- read surf conditions and identify hazards
- Discuss types of surf breaks
- Discuss Weather/ Swell conditions, relate to maps and forecasts
- Discuss how to improve skill level
- GROUP PHOTO

#### SURFING

- Length of ride, wide stance, weight forward
- Maintaining position
- Duck dive/ Eskimo roll

### Session 3

- INTRO BOARD RESCUE – How to perform efficient and appropriate rescue of injured or troubled surfer (conscious).
- Unconscious rescue
- Board Rescue, surfers pair up and rescue each other
- Basic first aid, stings, fractures



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#### **Session 4 - *Push the boundaries***

INTRO - Surf Etiquette, wave direction left or right wave, forehand and back hand surfing  
SURFING

- Catching green faced waves
- Turning / traversing
- Surfers spread out, more advanced to another bank

#### **Session 5 - *Team Building/ leadership skills/communication skills***

- Surfing equipment
- Tips for future surfing enjoyment

SURFING

- Tag Team event, final skill assessment

This program is a guide and will be effected by venue, surf conditions and surfers abilities.



## Personal Equipment

### Clothing

- Bathers
- 2 shirts, one light, the other warmer. Preferably long sleeved for better sun protection.
- 2 pairs of long trousers/long tights or shorts, track suit pants are ok. (Avoid jeans)
- Jumper
- Walking shoes
- Thongs
- Underwear/socks
- Broad-brimmed sunhat (one that covers the ears and back of neck)
- Sunglasses
- Warm wear, such as a beanie, thermal and gloves for cold nights.
- Rain jacket
- Wetsuit (optional)

### Sleeping

- Sleeping bag (preferably down)
- Sleeping mat (foam mats are cheap, durable and do the trick!)
- Pillow

### Toiletries

- Soap/body wash
- Toothbrush and toothpaste
- Comb or brush
- Towels x 2 (beach and shower)
- Any personal first aid equipment (i.e. Ventolin, bandaids etc.)
- Sunscreen and SPF Lip-balm

### Eating

- Light plate, bowl & mug
- Eating utensils
- Drink bottle
- Tea towel
- Food for all meals including snacks (we have access to a camp kitchen including BBQ, fridge, stove, toaster)**

### General

- Day pack
- Pencil & Notebook
- Torch (with spare batteries),
- Hand sanitiser
- Camera, book, cards
- iPod (for tent use only)

### Group Equipment (Provided)

- Tent plus poles & pegs



# CONSENT FOR CAMP

## FROM THE SENIOR SCHOOL

As parent/guardian of:

I give my consent:

For my son/daughter to participate in:

at / on

## Agreement

- I agree to delegate my authority to supervising teachers/instructors. Such leaders may take whatever disciplinary action they deem necessary to ensure the safety, well-being and successful conduct of the students as a group and individually.
- In the event of an accident or illness, and contact with me being impracticable or impossible, I authorise the teacher-in-charge to arrange whatever medical or surgical treatment a registered medical practitioner considers necessary. I will pay all medical and dental expenses incurred on behalf of my child.
- I have provided all information necessary to plan safe and reasonable health care support for my child. This includes, if relevant, information about any activity modifications my child may require for medical reasons.
- I consent to my child’s doctor or medical specialist being contacted by medical personnel in an emergency.
- The information given is accurate to the best of my knowledge.

Signed: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

## EMERGENCY FAMILY CONTACTS

### Parent/Guardian

<input type="text" value="(address)"/>	<input type="text" value="(home phone)"/>	<input type="text" value="(work phone)"/>	<input type="text" value="(mobile phone)"/>
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### Alternative Emergency contact

<input type="text" value="(name)"/>	<input type="text" value="(address)"/>	<input type="text" value="(phone)"/>
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Staff supervising this camp will use the medical and personal information you have already provided to the school and which is recorded on the School’s database. If circumstances have changed since last updating your child’s personal information please advise of any changes using the attached form. All forms should be returned to the Senior School Office. After reviewing the camp programme please advise us of any additional information that would assist our staff to care for your child in this camp setting. This information will not be used to update the School’s permanent records and will only be used for this camp/activity.

**ADDITIONAL INFORMATION  
SPECIFIC TO THIS ACTIVITY / CAMP**

**Confidential**

*To be completed by the PARENT/GUARDIAN for students who need additional support whilst on camp. This information is confidential and will be available only to supervising staff and emergency medical personnel and will not be recorded on the School’s permanent database records.*

**Student Name**

\_\_\_\_\_

Please provide details of any current situation that will affect your child undertaking this activity/camp including any dietary needs.

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.....

**Routine supervision for health care related safety**

Does your child need additional supervision for health-related safety?       Yes       No

**If yes, consider and attach as relevant:**

- Instructions from the child’s doctor
- Medication plan  
*If assistance with medication must occur on camp identify responsibilities for:*
  - Delivery, storage, supervision, record keeping
  - Off-site activities
  - Reminding if necessary
- Health service provider details  
*If a care/health worker is involved because requirements exceed staff training and duties (i.e. other than oral or metered dose inhaler medication), write down:*
  - Who this is and the contact staff member?
  - How, when and where will this occur?

**Signed:** \_\_\_\_\_

**Date:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_





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**INFORMATION TO UPDATE SCHOOL'S PERMANENT RECORDS**

**Confidential**

*To be completed by the PARENT/GUARDIAN to update student information on the School's permanent database records.*

**Student Name**

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**Personal**

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**Medical**

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**Other**

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**Signed:** \_\_\_\_\_

**Date:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_

