**Tinaroo EEC – Final Numbers and Adult Alerts**

This form must be returned by email a minimum of 7 days prior to your arrival

admin@tinarooeec.eq.edu.au

**School Name:**

**Camped at:** Barron River Campus or Black Gully Campus (delete one)

|  |  |
| --- | --- |
| **Group** | **Numbers** |
| Boys attending |  |
| Girls attending |  |
| Female accompanying adults |  |
| Male accompanying adults |  |
| **Total:** |  |
| Additional Information: |

**Visiting teachers and accompanying adults**

* 1 class = Class teacher plus 2 additional adults.
* 2 classes = 2 Class teachers plus 2 additional adults.
* 3 classes = 3 Class teachers plus 3 additional adults.
* 4 classes = 4 Class teachers plus 4 additional adults.
* Additional staff to cater for students with special needs.

**Adults Alert and Dietary List**

* Clarify if visiting staff are the following:

**P** (Principal), **T** (Teacher), **TA** (Teacher Aide), **C** (Chaplain), **PST** (Pre-Service Teacher), **PA** (Parent Assistant)

Please use individual consent forms to provide TEEC with essential ‘Alert’ information.

List only those with dietary requirements or medical conditions

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Adult Name** | **Role** | **Working with** | **Dietary Requirements** | **Severe Medical Conditions** |
| Eg. Peter Brown | T | Red Group | Vegetarian | Severe Asthma |
| 1  |  |  |  |  |
| 2 |  |  |  |  |
| 3 |  |  |  |  |
| 4 |  |  |  |  |
| 5 |  |  |  |  |
| 6 |  |  |  |  |
| 7 |  |  |  |  |
| 8 |  |  |  |  |