

ADDRESS I 45 Knighton Road, Hamilton, 3216 PHONE I (07) 856 5399 FAX / ANSWERPHONE I (07) 856 5393 WEBSITE I www.kns.ac.nz PRINCIPAL I Stuart Armistead M.Ed. (Educational Leadership), B.Ed., Dip.T.

Friday, 27th November

Dear _____

Thank you so much for offering to help next week. Without you, we couldn't take part in the exciting range of activities we have lined up! Below are the times that we require you on the day or days that you have offered to help with supervision and/or transportation. We will be meeting each day in Room 29 before making our way to our venue.

You have offered to help on _____

Day	Tuesday 1st Dec	Wednesday 2nd Dec	Friday 4th Dec
Venue	Eastlink Sports	Extreme Edge Rock Climbing	Pōwhiri and Pools at the University of Waikato
Meeting time	8.45 am to leave just after 9 am	10:10 am to leave at 10.30	8.45 am to leave just after 9 am
Return Time	2.45 pm (approx)	12.45 (approx)	2.45 (approx)
Mode of Transport	Walking	Cars	Walking

If you have offered to help on Friday, please be mindful of the tikanga (customs and values) around pōwhiri and wear either a dark skirt or trousers (females) or dark trousers and shirt (men). It is no problem if this is your first time at a pōwhiri - you just need to follow the children's lead. They have been learning about pōwhiri and this is their time to shine. You are welcome to bring something more comfortable to wear after the pōwhiri if you would like. We are swimming and playing games at the university for the rest of that day.

Please remember, your role is to support the students so they have a positive experience that also allows them to feel safe to step out of their comfort zone. There is no need for you to worry about manage behaviour - that is what I will do.

Lastly, in order for us to have your help, we need you to fill out a volunteer helpers form. I have attached this form below. If you could please fill this out and return it to me asap it would be greatly appreciated

If you have any questions, please don't hesitate to contact me directly

Deb Forrester | Room 29 | dforrester@kns.ac.nz

Volunteer Helper Disclosure Form

This form is to be completed by all volunteer helpers on EOTC events. These may be kept on file and used repeatedly.

Name	
Address	Phone - home work mobile

I am the parent/caregiver of (name): _____

OR 🗇 Other volunteer

I have the following skills/experience/qualifications:

Qualification	Tick if current	Notes
First Aid Certificate		Valid until:
CPR Certificate		Valid until:
Life Saving Certificate		Valid until:
Teacher Registration		Valid until:
Swimming ability (please describe) N/A		
Relevant instructor / coaching qualifications (please list)		
Other appropriate skills / experience (please describe)		

If providing transport (please tick relevant box):

I hold a current full car licence			
The vehicle I am driving is registered		Registration number	
The vehicle I am driving is roadworthy and has a current Warrant of Fitness			
Each passenger in the vehicle will use a seat belt			
The seating capacity of the vehicle will not be exceeded			

As a volunteer helper taking part in the school EOTC event:

- · I am willing to comply with requests of staff and will follow the safety procedures they have set.
- · I am willing to assist in aspects of running the event, based on the information I have supplied on this form.
- $\cdot~$ I agree there is no place for alcohol on a school EOTC event.
- · I accept the terms of my involvement as stated above.
- I declare that I do not have any convictions relating to dangerous driving, violent or sexual offending, and I agree to police vetting if required.

Signed:	 Date:	

Name (Printed):	
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