

# Easter Camp is back again in 2010

We all know that last year was an awesome camp; this year will be even bigger and better! We will enjoy great community times of worshiping together, as well as a ton of games and crazy fun times. We really want you to be a part of it. Camps are the best way I know of to bond together as a community—so make sure you don't miss out on all the fun!

**DATE:** Fri 2nd April—Mon 5th April 09

**WHERE:** King River Camp, 953 Upper King River Rd  
CHESHUNT STH (40 min south of Wangaratta)

**COST:** \$160 per person which includes:

All meals

3 night's dorm accommodation

Transport

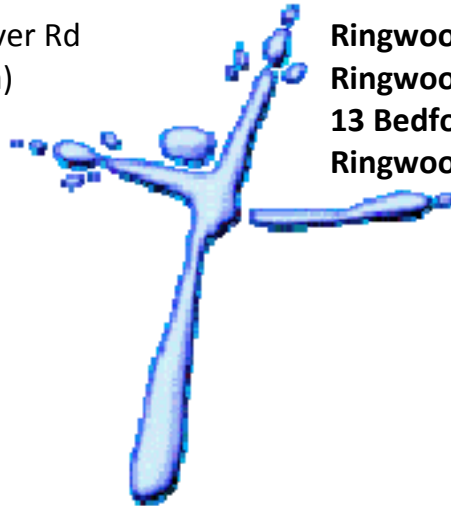
Activities

**WHO:** All Youth in years 7-12

**YOU NEED TO GET YOUR  
REGISTRATION FORM IN  
ASAP!**

Latest date for  
registration is:

**FRIDAY 19TH MARCH**



**Ringwood Youth Ministry  
Ringwood Church of Christ  
13 Bedford Road  
Ringwood, VIC 3134**

Transport is available to and from the camp in the minibus and leaders' cars. We do not allow any first year P plate drivers to drive young people around.

## **DEPARTURE TIME**

8am Friday morning— Church car park (Pitt St)

## **RETURN TIME**

4pm Monday afternoon—Church car park (Pitt St)

## **ACCEPTANCE LETTER**

On receipt of your registration form we will issue an acceptance letter detailing more specifically what you will be required to bring to camp, including costumes, musical instruments, and any specific equipment. We will also provide emergency contact numbers for the campsite and more detail regarding specific activities. Ringwood Church of Christ is committed to keeping young people safe at all times. We will have several leaders with First Aid training, fully stocked First Aid kits and leaders with Bronze Medallion for water activities.

Please print and fill out the application form and return it to the Church office by 19<sup>th</sup> of March, space is limited so get your application in ASAP!

# CAMP REGISTRATION FORM

Please fill out and return with your payment to:

Ringwood Church of Christ—13 Bedford Rd RINGWOOD 3134

NAME
ADDRESS
POSTCODE
DATE OF BIRTH
HOME PHONE / MOBILE
EMAIL
MEDICARE NUMBER
EMERGENCY CONTACT NAME
EMERGENCY CONTACT NUMBER

## PLEASE SEE OVER PAGE TO COMPLETE DETAILED MEDICAL INFORMATION

I, the undersigned, approve of this application. In giving my consent I authorise those responsible for the camping program (even in the event of accident or illness to the applicant whilst participating in the camping program) to obtain such medical assistance as may be reasonably required.

SIGNED (PARENT / GUARDIAN):

DATE: \_\_\_\_\_

<p>I have enclosed the camp fee of \$160 in the form of (please circle) Cost includes gst</p> <ul style="list-style-type: none"> <li>CASH</li> <li>CHEQUE (Made payable to Ringwood Church of Christ)</li> <li>CREDIT (See over page for credit card payment slip)</li> </ul>
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## IMPORTANT MEDICAL INFORMATION

(Please circle YES or NO)

Have you had an anti-tetanus injection?	YES	NO
Date of injection:		
Do you suffer from diabetes / epilepsy?	YES	NO
Do you suffer from hay fever / asthma?	YES	NO
Medication:		
Are you allergic to any food / drugs?	YES	NO
Please indicate:		
Will you be taking medication on camp?	YES	NO
Please indicate:		

Please indicate any special dietary requirements:

Any other relevant information we need to know?

## CREDIT CARD AUTHORISATION

I authorise Ringwood Church of Christ (13 Bedford Rd, Ringwood, 3134), to charge my credit card for the payment of Easter Camp registration fee.

I want to pay by:    

Card No:

Card Expiry Date: \_\_\_/\_\_\_/\_\_\_ Amount: \$ \_\_\_\_\_

Name on Card: \_\_\_\_\_

Signature: \_\_\_\_\_

Confidentiality: The information on this form will be treated with absolute confidentiality. It will only be used for the purpose of making this payment. Access to this information is restricted to the Coordinator of Easter Camp and the Treasurer. We will not disclose this information to any other organisation or third party.