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st faith's youth chosen camp st faith's to youth belong camp

[11-13 September 2009]

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Date: 11-13 September 2009

Location: Crusader Union, Galston Gorge
Crusader Road, Galston

Transport: Arrange own transport

Arrive: Friday Night – 6:30pm to 7:00pm
(have dinner before coming)

Depart: Pick up Sunday arvo – 2:30pm

Cost: \$130 per person
(two or more registrations - \$120 per person)

Speaker: David Fell
(Youth Minister @ St Matthew's Church Manly)

Topic: "Chosen to Belong"

Bring: Bible, pen, sleeping bag, pillow,
toiletries, towel, warm clothes.

Any Questions?

Youth Minister – Ben Molyneux – 9971 0347 (ben@stfaiths.org.au)

Registration closes Friday 28th August, 2009



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CAMPER DETAILS:

Name: _____

Address: _____

Suburb/Postcode: _____/_____

Email: _____

Home Ph: _____

Mobile: _____

School: _____

Year Group: _____ **Age:** _____

PAYMENT DETAILS: (please tick relevant boxes)

Single Camper - \$130

Two or more campers - \$120 per camper

I'd like to donate \$_____ to help a struggling camper

Total Amount: \$_____

I will be paying by.....

Credit Card - visa // mastercard // amex (please circle)

Card Number _____ Exp Date _____

Name on Card _____ Sign _____

Cheque – payable to St Faith's Anglican Church

Cash – please hand in with rego – don't send.

Please turn over for parental permission form....

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EMERGENCY CONTACT INFO:

Contact Name: _____

Relationship to Camper: _____

Emergency Contact Number: _____

Medicare #: _____

Special Dietary Requirements: _____

Daily Medication Requirements: _____

1. Whilst every precaution will be taken to ensure the good welfare and protection of my child, St Faith's Anglican Church, their staff, leaders and others acting on their behalf are hereby released from any liability in the event of accident or misfortune, damage or loss that may occur to the campers or their property.

2. In the case of a medical emergency, I hereby give permission to the doctor chosen by the camp directors to secure proper treatment for my child.

3. During the course of the weekend, I am aware that my child may be captured on photograph or video which may be used by St Faith's for promotional or historical purposes. Any questions please contact Ben Molyneux.

Signature: _____ Date: _____