

Name of Camper: _____ Age: _____
 Date of Birth: ____/____/____ Male Female School Attending: _____
 Address: _____
 _____ Post Code: _____
 Home Phone: _____ Email: _____
 Last Camp Attended: _____ Grade in 2009: _____
 I would like to room with: _____
(Full Name of ONE Friend Only. We prefer to allocate campers according to age)

Which Camp Would you Like to Attend? **Camp 4**

In an Emergency Who should we Call?

Name of Parent / Guardian: _____
 Home Phone: _____ []'s Work No: _____ []'s Mobile: _____
 *Please Put Persons Name in []'s []'s Work No: _____ []'s Mobile: _____
 E.g. [Mum]'s Work No: 03 64.....

Second Emergency Contact (In an Emergency we will contact this person if the Parent / Guardian is not Available)

Name: _____ Relationship to Camper: _____
 Home Phone: _____ Work Phone: _____ Mobile Phone: _____

Medical Details

Bed Wetting: Asthma: Migraine: Travel Sickness: Sleep Walking: Allergies:
 Please Specify any Medication Required: _____
 Please Specify any other Disabilities or Conditions (Including Behaviour) that may require special Care:

 Please Specify any Specific Dietary requirements including if your child is a vegetarian: _____

Tetanus Immunization, Last Booster date: _____
 Medicare Number: _____ Individuals No: _____ Expiry Date: ____ / ____ / ____

Parent / Guardian Consent and Authority

1. Riverbend is a Christian campsite administered by the Christian Brethren Churches of Circular Head
2. We expect all campers to **participate** in all camp activities including games, bible studies and devotions.
3. We want to have a safe and positive camp environment. Upon receipt of this application each camper will be sent a code of conduct to read and sign. If you are not prepared to agree to this code of conduct, you are invited to phone us and withdraw your application.
4. **Campers are not to bring Mobile Phones, Laptops, electronic Games, CD players, MP3 players etc, knives, scissors, swap cards, tarot cards or matches & Lighters.**
5. Absolutely no drugs, alcohol or cigarettes are allowed at camp.
6. At Riverbend we want to care for each and every child who comes to our holiday camps. This begins when the child is dropped off and continues until they are picked up by their legal parents or guardians. To help us could you please fill in the following: (Please note that all information is treated confidentially. Cabin leaders and senior leaders are briefed on any medical or behaviour problems that may require special care.)

Name of the Person Registering Camper: _____ Name of Person Picking Up Camper: _____
 Are there any issues relating to custody we need to know: Yes No _____

I approve of this application and agree that although camp leaders will exercise all possible care they are not liable for any injuries or damages which may be sustained to person or property. I also authorize the camp to obtain any medical attention as required at my expense and promptly notify me.
 I understand that if the camper does not abide by the camp's code of conduct, camp management reserve the right to remove them from camp.
 I also **agree** **do not agree** to the camper being administered panadol or paracetamol when necessary in recommended doses.
 I also **agree** **do not agree** to Riverbend using camp photos that include my child in newsletters brochures newspapers email website

Signed: _____ Date: _____

OFFICE USE ONLY C ID: _____ Receipt No: _____
 Date: _____ Fees paid Reply sent

Any extra details relating to information we need to know can be included in an attached letter

Riverbend's Youth Camp

The 2009
Mole
Riverbend Season 1



Please Bring

Sleeping bag & ground sheet, At least 1 set of Warm Cloths & Drinker Bottle, We will be having a themed meal one night the theme will be the letter "M". We cant wait to see you there!

Arrive 3pm Tue 27th Jan, Leave 11:30Am Sat 31st Jan

Youth Camp costs: \$110 per person

Fees MUST be paid with applications*

No applications accepted by Fax, Email or over the phone

Riverbend Youth centre provides a happy holiday for young people in an environment where principles of Christian living are taught and practiced. Each day's program includes informative Bible devotions and discussions. We aim to improve the quality of life of each camper.

Our leaders care about your children. We want them to feel safe and happy at camp and we aim to give them an enjoyable time.

We offer games, crafts, outdoor activities, excursions, films, indoor games, outdoor sports, quizzes, concerts, singing AND really really great food.

Please read the consent section carefully before signing it

Upon receipt of your application and fee, a letter of acknowledgment will be sent giving further details.
PLEASE NOTE: If camp reaches capacity you will be placed on a waiting list & notified of availability.

* For cancellations prior to camp the fee will be refunded less \$20.

Reply to

Riverbend Youth Centre. PO Box 768, Smithton Tas 7330
Phone (03) 6452 1635 Fax (03) 6452 1699 Email admin@riverbend.org.au ABN 27 214 212 924
Visit our web page at: www.riverbend.org.au

Please Note: We now Have a Post Office Box Please See below!!