



9 – 14 JANUARY 2019

QCCC, 52 KESWICK RD, NORTH TAMBORINE, QLD 4272

GCCHURCH.NET/TEEN-CAMP-2019

COST: Location dependant

\$400AU – Sydney, Melbourne, Brisbane, Gold Coast, Adelaide

\$150AU – Perth (AUS), Auckland (NZ), Nadi (FJ), Suva (FJ), Port Moresby (PNG)

Please complete all pages of the 2019 South Pacific Australia Teen Camp Registration Form' for each camper and leader attending the event.

Once completed we want all forms be handed in to your local ministry leadership, whom we are asking to sign off on each camper to show they approve of each teen campers attendance at the 2019 South Pacific Australia Teen Camp.

Registration will close on Sunday, 9 December 2018. Local ministry leaders will need to send a detailed list of registered campers and leaders (along with their forms) via email and complete the transfer of funds as per instructions below.

We ask that each church pray and continue to announce this yearly event. We want to again iterate how excited we are to be hosting Teen Camp and cannot wait to draw closer to God together.

REGISTRATION & PAYMENT INFORMATION (for ministry leadership use only)

Teen ministry leaders are to email your detailed list of registered campers for this event to Kaitlin Mulhearn at kaitlin.mulhearn@gmail.com by COB Sunday, 9 December 2018.

Please have your church administrator submit one payment, constituting the total sum of registered participants.

EVENT BANK DETAILS

WESTPAC Bank
Gold Coast Church of Christ Events

BSB# 034-660
Account# 390388

If you have any questions, queries or issues, please do not hesitate to contact Robert Mulhearn – rt.mulhearn@gmail.com or (+61) 468-823-866



FURTHER INFORMATION

This document will provide all information required in order to attend this event, however, if you require further information such as maps, camp schedule and other details you are welcome to visit the official website.

Link: WWW.GCCHURCH.NET/TEEN-CAMP-2019

WHAT TO BRING TO CAMP

Bible, Notebook and Pen/Pencil

Bedding/Sleeping Bag
- Bed Sheets and Pillow Case

Summer Clothes (30C+)
- 5 days' worth
- Must be modest

At least 2x Towels

At least 1x Closed Shoes (Sneakers)

Jandals/Sandals/Flip Flops

Toiletries

- Shampoo, Soap, Deodorant, etc.

Medications (in original bottles)
- Bring instructions for use

Swimwear (Modest)

Sunscreen and Bug spray

Water bottle

Torch/Light Source

Note: Mobile phone devices will be confiscated at the start of Teen Camp and returned before final departure at the close of Teen Camp

DRESS CODE

Male

Shirt on while swimming

No Sleeveless (Dropped armhole) Shirts

No AFL 'short' Shorts, shorts must also sit around the waist

Female

Modest swimwear (inc. swimming shorts)

No spaghetti strap shirts, strapless shirts, or shirts that reveal mid-drift

No short shorts

Note: If you are wearing any clothing not abiding by this list, while at camp, you will be asked to change into appropriate attire



PARENT RESPONSIBILITIES

1. Registration and Travel Information

Make sure all necessary forms/information has been submitted, along with payment to ensure Teen Camp registration has been completed correctly.

Ensure you have the correct contact information and details for flights including Passports, VISA's and Check-in ID (where required).

2. Medication, Handling and Use

Please ensure that your Teen has all required medication, in their original packaging along with instructions for use in case of emergency.

Check all medical information on your registration form to ensure validity.

3. Spiritually Prepare for Teen Camp

Talk through various challenges the camper may face, such as conflicts with others, how to resolve them, living and sharing with other people, the possibility of injury, etc.

Discuss character (Selfishness, Gratitude, Humility, and Perseverance) with them using scripture in order to have them come into the event with a soft heart, and ears to hear.

4. Respect for Others, and the Rules

Respect, politeness and following the rules at Teen Camp are important when trying to achieve the most effective Camp possible.

All campers need to know what we expect (but also what parents should expect) in terms of their behaviour and obeying those in authority. We will go over all the Disciplinary Procedures with them at Camp upon arrival.

5. Properly Packed

Make sure your Teen is properly packed with comfortable clothing and the items on the provided list. Please try not to 'over-pack' as the Teens will be left lugging it all around.

6. Encourage Regional Unity

Our region is diverse, and growing quickly, we would like parents to encourage the Teen camper to get the most out of camp by making new friends, trying different activities, and being open to sharing their hearts. *"Leave with no regrets"*

7. Electronic Black Out

Please discuss and reinforce our standards regarding all electronic (specifically mobile phones). Your Teen will not have access to this equipment during the camp.

Note: Phones will always be available via leadership if needed for special circumstance.



2019 SOUTH PACIFIC AUSTRALIA TEEN CAMP REGISTRATION FORM

Name of teen camper: _____ DOB (include year) _____

Gender: M F (circle one) First time at teen camp? Y N (circle one)

Year in school (in 2019): _____ Baptism Date (if applicable): _____

T-shirt size ADULT: XS S M L XL (circle one)

Parent/Guardian Name: _____ Email: _____

Parent/Guardian Home Phone: _____ Mobile: _____

Parent/Guardian Mailing Address: _____

Emergency Contact: (other than parents): _____

Relationship: _____ Phone: _____

Name of Physician: _____ Phone: _____

Medicare Number: _____

Private Insurance Information (if applicable): _____

Medical Insurance Company: _____ Phone: _____

Member Number: _____

HEALTH HISTORY

The following information must be completed by the parent/guardian

Allergies - List all known allergies and describe how reaction is managed

Medication Allergies - List all known allergies and describe how reaction is managed

Food Allergies - List all known allergies and describe how reaction is managed

Other allergies (insect bites, hay fever, asthma, animal dander, etc.)



Current Medications - Please list **ALL** medications (including over the counter or non-prescription drugs) taken routinely. Be sure that the teen camper brings enough medication to last the entire time at teen camp in the original package/bottle that identifies the prescribing physician, name of drug, dosage and frequency. All medication must be given to leadership upon arrival.

Med #1: _____ Dosage Times Taken: _____

Reason for taking:

Med #2: _____ Dosage Times Taken: _____

Reason for taking:

Med #3: _____ Dosage Times Taken: _____

Reason for taking:

Med #4: _____ Dosage Times Taken: _____

Reason for taking:

Date of last tetanus immunization: _____

Activity restrictions (restrictions only relate to medical reasons):

Has the camper had any recent injury, illness or infectious disease? Y N (circle one)

Please explain: _____

Has the camper ever been hospitalized, had surgery or had a head injury? Y N (circle one)

Please explain: _____

Has the camper ever had seizures? Y N (circle one)

Please explain: _____

Does the camper have diabetes? Y N (circle one)

Please explain: _____

Does the camper have mononucleosis or problems with sleepwalking? Y N (circle one)

Please explain: _____

Does the camper have problems with constipation/diarrhoea? Y N (circle one)

Please explain: _____



If female, does the camper have abnormal menstrual history? Y N (circle one)

Please explain: _____

Does the camper have frequent headaches or prone to frequent ear infections? Y N (circle one)

Please explain: _____

Does the camper have a chronic or reoccurring illness/condition? Y N (circle one)

Please explain: _____

Has the camper ever been knocked unconscious or passed out from exertion? Y N (circle one)

Please explain: _____

Does the camper have wear glasses, contacts or other eyewear? Y N (circle one)

Please explain: _____

Does the camper have problems with joints? (Knee, ankle, etc.) Y N (circle one)

Please explain: _____

Does the camper have any skin problems? (Itching, rash, etc.) Y N (circle one)

Please explain: _____

Does the camper have an eating disorder? Y N (circle one)

Please explain: _____

Has the camper been diagnosed with any mental health disorder? Y N (circle one)

Please explain: _____

Has the camper even had suicidal thoughts? Y N (circle one)

Please explain: _____

PROVIDE THE APPROPRIATE SIGNATURE BELOW

I, _____, as parent/guardian of
_____ the teen camper, verify that my child is
both physically and mentally healthy to attend the 2019 SPA Teen Camp.



2019 SOUTH PACIFIC AUSTRALIA TEEN CAMP WAIVER CONDITIONS

I, _____ as parent/guardian of _____ the camper, give permission for the camper to attend and to participate in all activities of the 2019 South Pacific Australia Teen Camp located at the Queensland Conference and Camping Centre, Tamborine, QLD as sponsored by the Gold Coast Church of Christ. 2019 South Pacific Australia Teen Camp activities may include, but are not limited to, swimming activities, athletics, and transportation by personal vehicle or by public bus transportation to and from the campgrounds.

As evidenced by my signature below, I hereby waive all claims that I or my heirs or assigns might have against the Gold Coast Church of Christ or any of their subsidiaries, or any other sponsoring churches, their directors, officers, church and Teen ministry leaders, members or other persons or entities who lead or direct the 2019 South Pacific Australia Teen Camp arising from or in connection with the camper's participation in 2019 South Pacific Australia Teen Camp activities. Furthermore, I hereby release from liability the persons and entities mentioned above for any and all injuries or illnesses that are incurred by the camper arising from or in connection with the camper's participation in 2019 South Pacific Australia Teen Camp activities. I understand that the teen camper's participation in camp activities may involve inherent dangers that could result in injury, illness or even loss of life to the camper and have considered such risks prior to executing this waiver and release.

I understand the Teen Camp Director reserves the right to dismiss any teen camper whose behaviour/attitude is detrimental to the welfare of the teen camp or whose conduct is not in accordance with the standards of the 2019 South Pacific Australia Teen Camp. I understand that in the event of dismissal or withdrawal because homesickness, misconduct or any other cause except for medical emergencies, that no refund will be given.

As evidenced by my signature below, I acknowledge that I have read, understand and agree to the terms of the waiver and release and the other conditions of 2019 South Pacific Australia Teen Camp participation that are described herein. I have been advised of the potential dangers of the teen camper participating in engaging in 2019 South Pacific Australia Teen Camp activities and am aware of the legal consequences of signing the waiver and release.

Should it be necessary for the above-named participant to receive emergency medical attention or treatment while participating in 2019 South Pacific Australia Teen Camp activities, I hereby give permission for the person(s) leading or directing the camp activities (the "Teen Camp Directors"), to administer emergency medical treatment (i.e., first aid, etc.) to the teen camper or secure the services of an ambulance, hospital, physician or other medical professional to treat the teen camper as the Teen Camp Directors deem appropriate and necessary. I also acknowledge that the 2019 South Pacific Australia Teen Camp Directors are not responsible for the self-administration of medication or medical treatment by the teen camper. I understand that the 2019 South Pacific Australia Teen Camp, Gold Coast Church of Christ, and Teen Camp Directors have no health insurance to cover medical or hospital costs incurred by the Camper; therefore, financial responsibility for any medical or hospital costs shall be the sole responsibility of the Parent/ Legal Guardian.

PROVIDE THE APPROPRIATE SIGNATURE BELOW

Parent/Guardian's signature: _____ Date: _____

Church Leaders signature: _____ Date: _____