ACTIPASS Application Form-Big Camp 2024

ONE FORM PER CHILD

Please select which activities your child will be involved in and ensure you complete the last page.

Please send to Mishaellee Offer (NAC Youth Department) at: mishaelleeoffer@adventist.org.au or

PO Box 51, Aitkenvale QLD 4814

Early Bird price ends on 19th May 2024. Online Actipass purchasing closes 1st June 2024. Individual activity tickets can be purchased at Big Camp but will close at 11am the day prior to the activity.

These prices do not include the Pathfinder Fair Day (Sunday 23rd June) or the Mini Petting Farm (Friday 28th June). Actipasses can be collected from your division on Monday morning (24th June). Buses are provided for offsite activities for Primary, Juniors and Teens, and all prices include transport to/from activities. Personal cars and Youth bus will be available for Young Adults division.

Beginners (Ages 0-3 years) A parent or guardian must be present with the child/ren during the worships and crafts There is no price for beginners, but please register so we know how many children to cater for. Tick

Kindy (Ages 4-6 years)						
Day	Activity	Early Bird Price	Tick	Regular Price	Tick	
Kindy ACTIPAS	SS (Includes all the below) TOTAL:	\$25.00		\$30.00		
Monday	Craft	\$5.00		\$6.00		
Tuesday	Craft	\$5.00		\$6.00		
Wednesday	Craft	\$5.00		\$6.00		
Thursday	Craft	\$5.00		\$6.00		
Friday	Craft	\$5.00		\$6.00		
Designated person/s who can collect child:						
Name:	Name: Contact Number:					
Name:	Name: Contact Number:					
Name:		Contact Number:				

Primary (Ages 7-9 years) Bus for offsite activity (Wednesday) will leave at 1pm from Leopold Street							
Day	Activity	Early Bird Price	Tick	Regular Price	Tick		
Primary ACTIPA	ASS (includes all the below) TOTAL:	\$85.00		\$100.00			
Mon/Tue	Craft	\$30.00		\$35.00			
Tuesday	Dress-Up Banquet Theme: Dress-up as a builder (Bob the Builder), artist or scientist	\$10.00		\$10.00			
Wednesday	Barra Fun Park (Offsite Activity)	\$30.00		\$35.00			
Thursday	Craft	\$15.00		\$20.00			
Does your child require a guardian to drop-off/collect them from their division? (Please tick) ☐ YES ☐ NO							
If YES, please li	st designated person/s who can collect chil	d:					
Name:	Contact Number:						
Name:	Name: Contact Number:						
Name:	Name: Contact Number:						

Junior (Ages 10-12 years)								
Buses for offsite activities will leave at 1pm from Leopold Street								
Day	Activity	Early Bird Price	Tick	Regular Price	Tick			
Junior ACTIPASS (in	cludes all the below) TOTAL:	\$145.00		\$160.00				
Monday	Colour Run	\$10.00		\$10.00				
Tuesday	Tenpin Bowling & Lazer Tag	\$40.00		\$45.00				
Wednesday	Barra Fun Park	\$30.00		\$35.00				
	Dress-Up Banquet Theme: Dress-up in the theme 'Light & Bright'	\$15.00		\$15.00				
Thursday	Ninja Park	\$30.00		\$35.00				
Monday- Friday	Craft	\$20.00		\$20.00				

High School (Ages 13-17 years) Buses for offsite activities will leave at 1:30pm from Leopold Street (7:30am for Magnetic Island Trip)							
Day	Activity	Early Bird Price	Tick	Regular Price	Tick		
High School AC	TIPASS (includes all the below) TOTAL:	\$168.00		\$190.00			
Monday	Tenpin Bowling	\$30.00		\$35.00			
Tuesday	Rock Pool (Strand)	\$8.00		\$10.00			
	Dress-Up Banquet	\$20.00		\$20.00			
	Theme: Dress-up as something beginning with the first letter of your name						
Wednesday	Big Day Out- Magnetic Island	\$55.00		\$60.00			
Thursday	Ice Skating	\$25.00		\$30.00			
Friday	Barra Fun Park	\$30.00		\$35.00			

Young Adults (Ages 18+) A combination of personal cars, carpooling and Youth bus						
Day	Activity	Early Bird Price	Tick	Regular Price	Tick	
Young Adults	S ACTIPASS (includes all the below) TOTAL:	\$110.00		\$125.00		
Monday	Amazing Race (11:00am)	\$5.00		\$5.00		
Tuesday	Gel Blaster (11:00am)	\$45.00		\$50.00		
Wednesday	Ice Skating (2pm)	\$25.00		\$30.00		
Thursday	Women's State of Origin (6:30pm)	\$35.00		\$40.00		
Friday	Day Out- The Strand (11am-3pm)	\$0.00		\$0.00		

CHILD/ATTENDEE DET	AILS					
Full Name:						
Address:						
Suburb:						
Postcode:	Postcode: State:					
Phone:		Mobile:				
Email:	1			1		
Gender:	Date of Bir	th:	Age:			
Swimming Ability (Please	tick):					
☐ Can't Swim						
☐ Fair Swimmer						
☐ Good Swimmer						
☐ Excellent Swimmer						
Are you staying on the ca	ampground:					
□ No						
☐ Yes						
If Yes, name campsite	is booked under	•				
What division will you/th (See divisions below)	ey be attendin	g:				
Beginner (Ages 0-3 years)	Primary (Ages 2	7-9 years)	High School	(Ages 13-17 years)		
Kindy (Ages 4-6 years)	Junior (Ages 10-12 years) Young Adults		dults (18+ years)			
EMERGENCY CONTAC	Т					
Emergency Name #1:						
Relationship to attendee	•					
Mobile/Phone:						
Emergency Name #2:						
Relationship to attendee	•					
Mobile/Phone:						
Medical History						
Medicare Number: Position on Card:						
Medicare Expiry: Year of last Tetanus Injection:						
Medical Conditions/Medications we should be aware of:						
(e.g Asthma, diabetes, epilepsy, re	ecent operations, ir	jury or illness)			

Dietary Requirements:

Consent & Release:

- I wish to/for my child to participate in the activities planned for my age level at Big Camp 2024, with the understanding that my activity pass covers me/my child only. I understand there are some risks involved and agree to be responsible for taking the time to learn safety techniques and the proper use and limitations of any equipment. I acknowledge that I may refuse to participate in any part of the activity I feel apprehensive about (if this does not endanger myself or the other participants and leaders).
- I assume full responsibility for my/my child's health, being such that the activities will in no way aggravate any conditions present. I declare that all statements on this form are true and accurate and will inform the leaders if there are any changes.
- In the event of an accident or illness, I authorize the Activities Director to consent, where it is impractical to communicate with me, to arrange medical treatment and emergency evacuation services as is deemed necessary for my safety or wellbeing.
- I give permission for photos/videos taken of me to be screened and used in promotional purposes by the NAC Youth Department.
- I understand that any self-provided transport is under my own liability. While all due care will be taken by NAC staff, I understand and take full responsibility for my actions and safety.

I have read, understood, and accepted the Terms and Conditions stated here:

Name of Participant/Guardian (Guardian if participant is under 18 years of age):

Signature of Participant/Guardian (Guardian if participant is under 18 years of age):

PAYMENT DETAILS						
(Please tick one):						
☐ Cheque	Amount \$					
☐ Cash	·					
☐ Visa						
☐ Mastercard						
Card Holders Name:						
(As appears on card)						
Card Number:		Card Expiry:				
Authorized Signature:						
Please return completed forms to Mishaellee Offer						
(NAC Youth Department)						
Email: mishaelleeoffer@adventist.org.au						
Post: PO Box 51, Aitkenvale QLD 4814						
Phone: (07) 4779 3988						