

## DETAILS...

### Messy Church Family Camp 2022

Messy Church vision is to use the wonderful tools of creativity and food as a way of helping people come close to God and each other.

This year's theme is

## Heroes

**Start - Friday 11 March @ 4 pm**

**Finish - Monday 14 March @ 2pm**

**Cost: \$120**  
**Under 3 are free**

We encourage congregations to sponsor their youth and/or contribute to their travel costs. Grants are available for families who cannot afford camp.

**Start time is 4 pm, No early arrivals please.**  
**BYO Dinner on Friday Night...**

#### Gear to remember:

1. Pillow and pillowcase, sleeping bag, or sheets & doona
2. Clothes suitable for outdoor activities
3. Towel and personal toiletries
4. Drink bottle and small backpack
5. Sunscreen and hat
6. A warm coat
7. Sturdy shoes for hiking
8. Musical instruments welcome
9. A dress up outfit for a 'Heroes' night
10. Money for ice-cream

**Camp Acacia**  
63-67 Grampians Road  
Halls Gap 3381  
Phone 03 5356 4241  
Melways page 620 D11

Venue: **Camp Acacia**, Halls Gap  
Location: Halls Gap  
Website: [uccamping.org.au/grampians/](http://uccamping.org.au/grampians/)

Please Register before  
Friday 21<sup>st</sup> February 2022

Confirmation of your registration and further  
details will be emailed to you!

Hosted by the Uniting Church

Watch the Promo Vimeo:

[UYC Messy Church Camp Promo Video - YouTube](#)



# Messy Church Family Camp



Uniting Church Presbytery of  
Western Victoria & Port Phillip West

**March 11-14, 2022**  
**Camp Acacia, Halls Gap**



# Heroes

#### Contact

Rev Linley Liersch – 0408 169 882  
[Linley.liersch@ppw.victas.uca.org.au](mailto:Linley.liersch@ppw.victas.uca.org.au)  
Susan Hobbs – 0429 881 238  
[youth@horsham.unitingchurch.org.au](mailto:youth@horsham.unitingchurch.org.au)



## REGISTRATION



**Must be returned to us by 21<sup>st</sup> Feb 2022**

Separate forms must be filled in for each family member...

Name:

Address:

Post Code:

Home Phone:

Mobile:

Date of Birth:      /      /

Year at School\*:                          M/F:

Email:

Church: (if applicable)

Families will be roomed together as per COVID rules at this time.

## **PAYMENT**

1. Please make Cheques payable to: “**Presbytery of Western Victoria Youth Camp**” (Our Bank Acc Name).

2. Direct Deposit BSB: 033-605 A/C:39-1033

Please include your **first initial and surname** as the reference.



**Send registration to:**

**Email:** [Linley.liersch@ppw.victas.uca.org.au](mailto:Linley.liersch@ppw.victas.uca.org.au)

**Post:** Messy Church Camp, c/- Horsham Uniting Church, 10 Pynsent St. Horsham VIC 3400

## MEDICAL

### In case of emergency contact:

Contact Name:

Home Phone:

Mobile:

Relationship to Camper:

Medicare Number:

Private Health Insurance Provider and Number:

Date of last tetanus immunisation:

COVID Double Vacc. Status (Over 12) YES \_\_\_

*(Show Phone Vaccination tick on arrival)*

Family Doctor:

Doctor Phone:

Are there any mental or physical disabilities, allergies or health problems that are likely to affect you/your child on the camp? Please specify:

1. Special dietary requirements: (eg. vegetarian, gluten free)

**It is expected that parents/ grandparents/ guardians will be responsible for their children's safety throughout the camp. But leaders will assist where practicable.**

## AGREEMENT

I, the undersigned, agree that I/my child will participate in the 2022 Messy Church Camp. I understand the nature of the activities at the Camp may include (but may not be limited to) bush walking, games, dormitory accommodation, communal eating, dancing and that risks may arise during these activities. I hereby authorise the leader in charge of the Camp or particular activity in which I am/my child is involved to consent, where it is impractical to communicate with me, to myself/my child receiving such medical or surgical treatment as the leader may deem necessary at any time during the Camp. I further authorise the use of Ambulance and/or anaesthetic by a qualified medical practitioner if, in his/her judgment, it is necessary. I accept responsibility for payment of all expenses associated with such treatment.

Please tick boxes:

- If separated, I understand that every effort will be made by the leader firstly to contact me in the event of any illness or accident.
- I confirm the particulars given on the medical form are correct.
- I/my child agree to abide by the rules and guidelines of the Camp leadership team and participate in all aspects of the Camp program.
- By signing this form the camper agrees to follow all the leader's instructions, so that camp will be enjoyable and safe. Failure to do so will require parents to collect child from the Camp.
- I agree for my/my child's photograph to be taken at the Camp and distributed to camp attendees and displayed at Church, on Facebook and Instagram pages.

(Parent/guardian to sign also if camper under 18)

Parent/Guardian:

Camper:

Date: