



OASIS
APOSTOLIC CHURCH

2026 Oasis Camp – Registration Form

Key Information for Camp:

- **When:** Friday 27 to Sunday 29 November 2026.
- **Where:** QCCC Mapleton, 70 Obi Obi Rd, Mapleton QLD 4560.
- **Cost:** \$210.00 per Adult & Child (6 yrs above); Child Under 5 yrs No Charge (Free); Camp Bus fee to be confirmed at a later date.

Key Dates Below:

- **Monday 20 April 2026:** First day to register for camp, complete online form below.
- **Monday 12 October 2026:** Last day to register for camp.
- **Sunday 15 November 2026:** Last day to pay camp and bus fees.

2026 Camp Registration Form:

To register for camp please complete form below. There are also 3 consent forms at the end of this form that need to be completed and signed. Please email the signed consent forms to registrations@oasisapostolicchurch.com.au, or pass the signed forms to Simon Lemalu.

1) Main Contact Person.

Full Name:
Date of Birth:
Mobile Phone:
Email:
Home Address:
Address Line 1
Address Line 2
City
State
Postal Code

2) Emergency Contact Person.

Please complete emergency contact details below?

Full Name:
Mobile Phone:
Email:
Relationship to you:

3) Are you registering as an Individual or as a Family?

Choose from list below.

- Individual, over 18 yrs old
- Individual, under 18 yrs old (require signed consent on this form)
- As a Family

4) Please list other family members attending camp?

Full Name	DOB	Relationship to you
	/ /	
	/ /	
	/ /	
	/ /	
	/ /	
	/ /	
	/ /	
	/ /	

5) Under 18 years old we require authorisation from your parent/guardian.

Please complete contact details below for your parent/guardian. Parents/guardians to complete and sign relevant consent forms at end of this document. Please email signed forms to registrations@oasisapostolicchurch.com.au, or hand the signed forms to Simon Lemalu.

Full Name:
Mobile Phone:
Email:

6) Accommodation Preferences.

Choose from list below.

- Happy to share with others
- Teenager/s can room with girls/boy's hub crew
- Combination the above

7) Please list Names of any Relevant medical needs, dietary/allergies needs.

Please complete details below if you or a family member has any medical or dietary needs? For allergies, please also supply a medical action plan. Click on + button to add new line for each family member.

Full Name	Medical concerns	Dietary Needs Or allergies

8) Transport to and from Camp Site.

Choose from list below how you will travel to and from the camp site? Travel by Bus, is additional fee to be confirmed at a later date. Details for travelling by bus will be released closer to time of camp.

Choose from list below.

- Own Private Transport
- By Camp Bus (one-way)
- By Camp Bus (return trip)
- Other?

9) Information for Payment of Camp Fees.

Below is bank details for payment of Camp & Bus Fees. Please also choose method to pay off your camp/bus fees. Note 15 November 2026 is last date for payments.

Bank Account Details:

- Acct Name: Oasis Missions Acct
- BSB: 064793
- Acct No: 10269790
- Ref: Input Surname 1st Pmt, 2nd Pmt etc

Choose Method of Payment below:

- Pay Full Amount
- Pay off by Instalments (e.g. weekly, monthly etc)
- Other? _____

Confirm total Camp fees to be paid?

\$

Cost: \$210.00 per Adult & Child (6 yrs above); Free for Child Under 5 yrs (No Charge); Bus fee to be confirmed at a later date.

10) Message

Add any comments below.

2026 OAC Camp – Consent Forms

Print off the 3 consent forms, sign them and email the signed forms to campregistrations@oasisapostolicchurch.com.au, or pass the signed forms to Simon Lemalu

- 1) Registration Confirmation
- 2) Under 18 Consent
- 3) Media Release

Registration Confirmation

I _____ confirm that myself and all named participants on this form will attend OAC Family camp from 27-29 November 2026. I confirm that all information provided is true and correct at the time of signing, and agree to provide any additional information/changes asap to the OAC camp organisers. I agree to pay all camp costs in full **by Sunday 15 November 2026**.

Signed: _____

Date: _____

Under 18 Consent

I _____ (parent's name) confirm I am the parent/guardian of _____ (child's name) and give my consent for my them to attend Oasis Apostolic Centre church camp from 27-29 November 2026 at QCCC M a p l e t o n and to take part in all camp activities. In the event of injury to the young person, where reasonable attempts to contact me are unsuccessful, I give authority for such medical treatment to be given to the young person as is recommended by a medical practitioner and seems in the opinion of the leader in charge to be reasonable and appropriate. I undertake to be responsible for any fees or charges with respect to that treatment and to pay those costs on demand.

Parent/Guardian Signature: _____

Date: _____

Media Release

I _____ give permission for video and photographs taken of myself and/or any other people named on this registration during the camp programme and understand and approve of these being used internally and externally including and not limited to Oasis Apostolic Church's website and social media sites now and in the future.

Signed: _____

Parent/Guardian if under 18: _____

Date: _____