

## CAMP BOOKING ENQUIRY FORM

Name of Organisation: \_\_\_\_\_

Address: \_\_\_\_\_

Suburb/Town: \_\_\_\_\_ P/Code: \_\_\_\_\_

Name of Group Coordinator: \_\_\_\_\_

Phone No.: \_\_\_\_\_ Mobile: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Preferred method of contact: \_\_\_\_\_ Email \_\_\_\_\_ Phone \_\_\_\_\_ Preferred contact time: \_\_\_\_\_ am/pm

**DATES CAMP REQUIRED:** Day In: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Approx. arrival time: \_\_\_\_\_

Day Out: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Approx. departure time: \_\_\_\_\_

**ESTIMATED NUMBER OF CAMPERS:** TOTAL \_\_\_\_\_

Males \_\_\_\_\_ Male Staff \_\_\_\_\_ Females \_\_\_\_\_ Female Staff \_\_\_\_\_

### CATERING REQUIREMENTS

	MON	TUES	WED	THUR	FRI	SAT	SUN
Breakfast	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Morning Tea	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lunch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Afternoon Tea	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dinner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Are there any variations to meals (ie takeaway/picnic): \_\_\_\_\_

### ABOUT YOUR GROUP

Which of the following describes your group:

☐ School ☐ Tertiary ☐ Corporate ☐ Sporting ☐ Recreation ☐ Church ☐ Social ☐ Family

**AGE BRACKET OF CAMPERS:** ☐ Primary Year \_\_\_\_\_ ☐ Secondary Year \_\_\_\_\_ ☐ Adult

**PROGRAM REQUIREMENTS (YMCA organised activities)**

☐ 100% Program ☐ 50% Program ☐ Tailored Program ☐ Old Petrie Town Activity/s ☐ No Programming

\*For quoting purposes only –subject to change.

\*Refer to Camp Booking Pack for activity and scheduling options.

### SPECIAL NEEDS

Attendees with Special Needs: E.G: physical/wheelchair, visual/hearing impaired, learning, psychological, behavioural.

Please list: \_\_\_\_\_

**HOW DID YOU HEAR ABOUT US?:**

☐ Referral ☐ Website ☐ Search Engine ☐ Advertising ☐ Been Before

Other: \_\_\_\_\_

### OFFICE USE ONLY

Deposit Paid \$ \_\_\_\_\_ Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Receipt # \_\_\_\_\_

**81 Byrnes Road North  
Joyner, QLD 4500**

**t 07 3882 1436**

**e camp.warrawee@ymcabrisbane.org  
www.ymcacamping.com.au**

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## OPTIONAL EXTRAS:

- ☐ **WASHING UP** – YMCA kitchen staff wash and dry dishes (\$0.77 per person per main meal, min \$55 per group)
- ☐ **FIRE WOOD** – chopped timber logs (\$55.00 per cage).

## WHAT FACILITIES/EQUIPMENT DO YOU INTEND TO USE (NO FEE):

FACILITIES	EQUIPMENT
<input type="checkbox"/> Volleyball Court	<input type="checkbox"/> TV/DVD Player
<input type="checkbox"/> Fire Pit	<input type="checkbox"/> PA System
<input type="checkbox"/> Projector & Projector Screen	<input type="checkbox"/> Sports Equipment (basketballs, footballs etc)

\* Please note if multiple groups onsite facilities/equipment may have to be shared.

**PROGRAM OUTCOMES:** Please select below which camp outcomes your group would like to achieve from the YMCA Camping – Learning Framework below (select 1 from each category):

## PERSONAL GROWTH

LEARNING EXPERIENCE	DESCRIPTION
<input type="checkbox"/> <b>BUILD RESILIENCE</b>	Develop and demonstrate coping strategies to adapt to individual and group challenges.
<input type="checkbox"/> <b>REINFORCE A POSITIVE OUTLOOK</b>	Campers are happy in the present moment and have a sense of wonder and optimism for a positive future and interact positively with each other.
<input type="checkbox"/> <b>DEVELOP NEW PHYSICAL ACTIVITY SKILLS</b>	Experience new adventure activities and develop skills to encourage lifelong physical activity in the outdoors.
<input type="checkbox"/> <b>SET GOALS</b>	Learn to set personal and group goals, persist and strive to achieve them.
<input type="checkbox"/> <b>MAKE HEALTHY CHOICES</b>	Understand how healthy choices contributes to physical, mental and emotional wellbeing.
<input type="checkbox"/> <b>DEVELOP INDEPENDENCE</b>	Campers take responsibility for their own actions and wellbeing and display initiative to effectively solve problems.
<input type="checkbox"/> <b>PROVIDE OPPORTUNITIES FOR LEADERSHIP</b>	Experience opportunities to influence and encourage positive group behaviour, lead by example.

## SENSE OF COMMUNITY

LEARNING EXPERIENCE	DESCRIPTION
<input type="checkbox"/> <b>BE SOCIALLY RESPONSIBLE</b>	Be inclusive and respectful of others, embrace diversity and contribute to their camp community.
<input type="checkbox"/> <b>SOLVE PROBLEMS TOGETHER</b>	Respect each other's viewpoints and work together to achieve outcomes.
<input type="checkbox"/> <b>WORK AS A TEAM</b>	Work collaboratively with peers using effective communication skills and developing trust between group members.
<input type="checkbox"/> <b>CONNECT WITH OTHERS</b>	Develop positive relationships with others, form new friendships and strengthen existing ones.

## CONNECT WITH THE NATURAL WORLD

LEARNING EXPERIENCE	DESCRIPTION
<input type="checkbox"/> <b>APPRECIATE THE NATURAL WORLD</b>	Experience interaction and connection with the natural world.
<input type="checkbox"/> <b>UNDERSTAND THE NATURAL WORLD</b>	Be exposed to and learn about the local ecosystems and human impact on the environment and develop respect for natural world.
<input type="checkbox"/> <b>PROTECT THE NATURAL WORLD</b>	Take responsibility to protect and further enhance the environment through their actions.

Our Outdoor Education staff will develop a program to help your group achieve desired camp outcomes.