



## Tallebudgera Recreation centre, Gold coast

### Full conference - cost \$100

- \*2 nights accommodation in spacious & modern ensuite rooms
- \*Worship and speaking sessions
- \*Delicious meals
- \*Direct access to beach and still water. Walking distance to Burleigh Heads



### TO Register...

- \*Deposit of \$50 **must** be received with completed registration form to secure place
- \*Limited number of spots available
- \*Non-refundable (unless a replacement person can be found to fill your place)
- \*NO partial stays.
- \*Full conference Fees payable by Sunday 5th February, 2012



➔ Please Turn Over

# Registration Form

Full Conference - Cost \$100

Deposit of \$50 must be received with completed rego form.

Remainder of Conference Fees payable by Sunday 5th February, 2012

Name: .....

Address: .....

Date of Birth: .....

Mobile No: .....

Email: .....

### Preferences for Room Allocation

*Please nominate 4 preferred roommates (we reserve the right for final allocation but will do our best to incorporate your preferences)*

1. .... 3. ....

2. .... 4. ....

## Age

Post Year 12 and above

## Room Arrangements

- \*Spacious & modern ensuite rooms which sleep up to 7 people
- \*Please bring bedding and pillows and towels
- \*You can nominate 4 preferred roommates.
- \*We reserve the right for final allocation to rooms but will do our best to incorporate your preferences.
- \*Separate rooms for guys and girls
- \*Married couples can share a room with other married couples

## Other Info

This is a drug and alcohol-free weekend

Linen and towels are NOT provided. Please make sure you pack bedding (including a pillow), as well as towels.

Please give registration forms together with payment to Kirsten Dell.

Dietary Requirements: .....

Emergency Contact Details

Name: .....

Contact Number: .....

Relationship to you: .....

Medical Details

Medicare Number: .....

Health Insurance Membership Number: .....

Food Allergies: .....

*In case of a medical emergency I (or parent guardian if under 18) give Bridgeman Baptist Community Church authority to take appropriate action at my expense.*

Signature: .....

*(if under 18, signature of parent/guardian)*

Office Use Only    Deposit:     Balance Owing:     Full Payment Received: Yes / No    Initials: \_\_\_\_\_