

SWAG



INform

Tuesday, July 19, 2005

<http://www.swag.org.au>

## FATHER & SON CAMP

### Caving at Bungonia – 30th, 31st July 2005

#### Dear Parents,

The next father and son camp for boys in both divisions is a caving weekend at Bungonia Gorge. We will be exploring caves as well as walking and other on the surface activities like bushwalking, abseiling and treasure hunting. Unfortunately the not-so-kind folks at Bungonia have decreed that there “Shall be NO fires” in the park, so you will need to bring lots of REALLY warm clothes. If you haven’t been to Bungonia before, then you can find out more from the National Parks web site at the following address (sorry for the length of it):

<http://www.nationalparks.nsw.gov.au/parks.nsf/parkContent/N0612?OpenDocument&ParkKey=N0612&Type=xo>

#### When

We are meeting on Saturday morning at Peshurst church at 6:45am.

*(Fathers - please talk to us if you are coming with your boys and have a car full.*

*It may be more convenient for you to meet at McDonalds Sutton Forest at 8:15am)*

We will aim to return to Peshurst by 4:00 – 4:30pm on Sunday afternoon.

#### What To Bring

- Lots of Warm clothes!
- Overalls or Dirty Clothes (no we won’t be doing the washing – ones that can get dirty)
- Shoes to match
- Clean Clothes for the trip home
- Rain gear
- Eating tools
- Tea towel
- Sleeping gear
- Shared tent
- A Torch or two
- Spare batteries
- More Spare batteries
- Bible
- Slice for Supper

#### How Much

**Boys \$30** (for the first \$25 for each after) **Fathers \$35** – includes food and camping/park fees.

Please bring this to SWAG next week (26<sup>th</sup> July) along with the permission slip so we can organise food etc.

From  
the SWAG leadership  
your servants in Christ

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#### Permission Slip

I give my permission for \_\_\_\_\_ to attend the father & camp with SWAG on 30-31 July 2005.

I understand that he may be traveling in a leader’s car.

- His father will be coming and will:
  - be driving
  - Need a lift

I agree to the procedures as set out in the SWAG form of indemnity.

Signed \_\_\_\_\_

Date \_\_\_\_\_

Medicare No. \_\_\_\_\_

Contact Phone \_\_\_\_\_