
Additional Information

What is the cost?

OPTION 1: 2 weeks - Nov 1-14th \$800 USD (\$150 Non-Refundable deposit)
Depart Aug. 30th-Arrive Nov 1

OPTION 2: 1 week - Aug. 7th-14th \$600 USD (\$150 Non-Refundable deposit)
Depart Nov 5/6th-Arrive Aug. 7th/8th

****If for any reason you need to travel on a different date, please confirm with administration first.****

(Contact administration for a payment plan)

What does this cover?

Housing, Breakfast & Dinner, Transportation, Invasion T-shirt, Transportation to and from airport & Sightseeing Day.

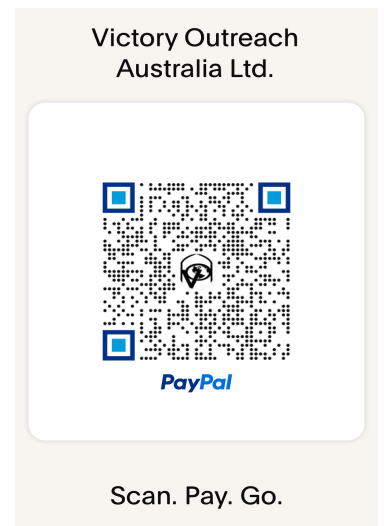
DEPOSIT DUE ASAP

FINAL PAYMENT OF CRUSADE FEE DUE: October 21st, 2023

PayPal Payments: Victory Outreach Australia

What you need to bring:

- o Valid Passport (send a copy of passport with application)
- o Apply for Visitor Visa Online: Subclass 601 Electronic Travel Authority at <https://immi.homeaffairs.gov.au/visas/getting-a-visa/visa-listing/electronic-travel-authority-601>
- o Personal spending money (Most ATM & Credit Cards work)
- o Church clothes, walking shoes & evangelism t-shirts.
- o Sleeping bags/blankets, pillows, towels & personal toiletries.
- o An international power converter adapter (240v) (if required)



Pastoral Reference *(Pastors please fill out this section)*

Please attach a reference letter on how you feel about this applicant coming on a short missions trip

Last Name: _____ First Name: _____

Church Name: _____

Position: (circle one) Senior Pastor/ Associate Pastor/ Lay minister

Email: _____

Signature: _____ Date: _____

Authorization for Credit Card Use

PRINT AND COMPLETE THIS AUTHORIZATION FORM AND RETURN
(All information will remain confidential)

Name on Card: _____

Billing Address: _____

Credit Card Type: _____ Visa _____ MasterCard _____ Discover _____ AmEx

Credit Card Number: _____

Expiration Date: _____

Card Identification Number: _____ (last 3 digits located on the back of the credit card)

Amount to Charge: \$ _____ (USD)

I authorize _____ to charge the amount listed above to the credit card provided herein. I agree to pay for this purchase in accordance with the issuing bank cardholder agreement.

Cardholder – Please Sign and Date

Signature: _____

Date: _____

Print Name: _____

Return the completed and signed form to the following:

