



Mt. Hope Bible Camp



est. 1973

Reunion

2016

where with FRIENDS we meet

September
23 & 24

\$30
Includes
T-Shirt

740.372.6422
info@mthopebiblecamp.com

3162 Mt. Hope. Rd. Otway, OH
www.mthopebiblecamp.com

Details

This year Mt. Hope Bible Camp will host our first annual Mt. Hope Bible Camp Reunion. This will be a two day, one night event that is geared toward staff members and former campers over the age of 18. For years, we have discussed the idea of having an alumni type event where Mt. Hope Bible Camp would bring together generations. Our hope is that everyone will be able to relive the days past and experience what's ahead for the ministry. By attending, you will get the opportunity to hear stories from the Beery and Stevens' era, meet and interact with staff from years ago and get a taste for some of the current camp activities and ministries.

As generations are connected throughout this weekend, we believe that stories of hope will fill the conversation. That's what we are after--encouraging each other through what God has used Mt. Hope Bible Camp to accomplish. With that said, we ask that you come prepared to share your answers to the following questions: (1) How did God use Mt. Hope Bible Camp in your life? (2) What is your favorite Mt. Hope story?

If you are unable to attend, please feel free to record or write your responses to the above questions and we will share them during the reunion weekend.

COST

\$30 (includes 4 meals, t-shirt and lodging)
\$10 per child of reunion participant
\$10 additional t-shirts

LODGING OPTION

Reunion participants will have the option to commute for the event or stay on the grounds.

*Lodging is on a first-come, first-serve basis.

SCHEDULE & WHAT TO BRING

For a detailed schedule of events and what to bring, visit our website and click Ministries/Camp Reunion.

Registration

CONTACT Please complete legibly in blue or black ink

Name _____ Male Female
Address _____ Age _____
City _____ State _____ Zip _____
Home Phone (_____) _____ Cell Phone (_____) _____
Email _____
Would you like to receive emails informing you of Mt. Hope events? Yes No
Emergency Contact Name _____
Home Phone (_____) _____ Cell Phone (_____) _____
Shirt Size (adult sizes only) XS S M L XL 2XL

REGISTRATION

Fri & Sat

Fri Only

Sat Only

LODGING

Yes No Requests or Needs _____

Please list any food, medication, insect or other allergies and describe the reaction and management of the reaction (use additional paper, if necessary):

List medical conditions that our staff should be aware of and please describe including heart condition, diabetes, ear infection, asthma, seizures, sleep walking, ADD/ADHD: _____

LIABILITY Please initial each statement below

_____ I acknowledge that participation in the activities at Mt. Hope Bible Camp, include but are not limited to recreation, hayride, waterslide, swimming, and hiking, involve risk to the reunion participant and may result in various types of injury including, but not limited to, the following: sickness, bodily injury, death, emotional injury, personal injury, property damage and financial damage. In consideration for the opportunity to participate in the activities, the reunion participant (and parent/guardian, if a minor) acknowledges and accepts the risks of injury associated with participation in activities. The reunion participant (and parent/guardian, if a minor) accepts personal financial responsibility for any injury, as well as for any medical treatment rendered to the reunion participant that is authorized. Further, the reunion participant (and parent/guardian, if a minor) releases and promises to indemnify, defend, and hold harmless Mt. Hope Bible Camp and Ohio Bible Conference, Inc. for any injury arising directly or indirectly out of the described Activity, the Participant, or otherwise.

_____ In case of medical emergency, when a legal guardian cannot be reached (if a minor), I authorize camp officials to secure appropriate medical personnel to hospitalize, secure treatment for, and to order injection, anesthesia, dentistry, or surgery for the reunion participant named on this form.

_____ I (reunion participant and parent/guardian, if a minor) hereby grant, voluntarily and with full understanding, to Mt. Hope Bible Camp (MHBC) and associated organizations including, but not limited to InFaith and Christian Camping and Conference Association, a license to the use and storage of my first name and image, by means of digital or film photography, video photography, audio recording or other documentation, printed publications, electronic publications, any Website created by or for the camps' benefit, with respect to the activity for use in its publications.

My signature affirms all of the above statements and permissions.

Parent/Guardian Signature _____ Date _____

PAYMENT

Deposit Received \$ _____ Cash Check # _____ Balance Paid \$ _____ Cash Check # _____