



MT. SALEM REVIVAL GROUNDS • CAMP 2025

Mt. Salem Revival Grounds was started in 1975 by the late Dr. Joe M. Boyd. Its purpose was to provide a training ground for preacher boys as well as a place for churches to bring their young people for camp in the summer. It is located in the wooded foothills of the Appalachian Mountains. The atmosphere has always been that of an old-fashioned revival where the preaching is hot, the invitations are sincere, and the results are lasting.

Combination Weeks

Junior/Youth Week I

June 9 - 13



Doug Brandenburg



Don Davis

Junior/Youth Week II

June 16 - 20



Jerald Chadwick



Larry Brown



Larry Oxendine

Junior/Youth Week III

July 21 - 25



Dennis Corle



Dewayne Walker



Bill Bartlett



Kevan Bartlett

Junior Weeks

Junior Week I - June 23 - 27

Junior Week II - July 14 - 18

**Dramatized Bible Stories by the
Mt. Salem Men of Ministry**

Youth Conference

June 30 - July 4



Randy Taylor



Randy Taylor, Jr.



Gary Lovens



Tim Davenport



Mickey Carter



Dennis Morrello

- Live Gospel Music
- Great Preaching
- Patriotic Multimedia Presentation
- Fireworks Sky Show
(Thursday, July 3rd following the evening service)
- Concessions and Grillers



Air-Conditioned Dorms
“The Backslider” Water Slide
mtsalemrevivalgrounds.com - 304.873.2315



Dr. Randy E. Taylor
Evangelist/President



MT. SALEM REVIVAL GROUNDS REGISTRATION FORM 2025

Name _____ Gender _____ Age _____ Date of Birth ____/____/____

Address _____

Grade this Fall _____ Home Phone (____) _____ Cell Phone (____) _____

Parent/Legal Guardian Name _____ E-mail _____

Church Name _____

Pastor's Name _____ Church Phone (____) _____

Emergency Contact/Relationship (other than parent) _____ Contact's Phone (____) _____

List allergies, dietary needs, or other pre-existing medical concerns (attach page if needed): _____

List medications camper is taking _____

Doctor's Name _____ Doctor's Phone (____) _____

(Camper's Insurance Provider)

(Policy Number)

(Name of Policy Holder)

Parents please sign and read if your child is under 18 / or adult over 18 read and sign:

I authorize the Director of Mt. Salem Revival Grounds to act in his best judgement in any emergency requiring medical attention for my child or adult camper. I will not hold the camp or the camp staff liable for any injuries while I am visiting Mt. Salem Revival Grounds. I also understand that in the event of a medical emergency, my insurance will be used and the camp insurance is purely secondary.

Parent, Legal Guardian or Adult Camper Signature: _____ Date ____/____/____

REGISTERING AS:

- ☐ Individual ☐ Group (Est. number in group) _____
☐ Family (Number in family over 2 years of age) _____

Week Planning to Attend: _____

LODGING ACCOMMODATIONS:

- ☐ Dormitories ☐ RV Pads
☐ Swiss Village Motel ☐ Tent Sites

(Air-conditioned, private bath, bed, and set of bunks per room)

NOTE: Registration fee must be enclosed to make reservations. Registration fees are non-refundable and non-transferable.

METHOD OF PAYMENT:

Check or Money Order (Make checks payable to Mt. Salem Revival Grounds)



☐ MasterCard



☐ Visa



☐ Discover



☐ American Express

Account # _____ Card Exp. ____/____

Signature _____

Registration Total \$ _____

Reserve your spot today by calling with your credit card!

Mail form to Mt. Salem Revival Grounds, P.O. Box 186, West Union, WV 26456

Phone/Fax: 304.873.2315 E-mail: mtsalem@citynet.net mtsalemrevivalgrounds.com