

GROUND BREAK

“Break up your fallow ground: for it is time to seek the LORD” - Hosea 10:12

MT. SALEM REVIVAL GROUNDS • CAMP 2026

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 15 - 19



Ryan Kooienga



Preston Judd

Junior/Youth Week II

July 20 - 24



Dennis Corle



Dewayne Walker



Patrick Seneff

Junior Weeks

Junior Week I - June 22 - 26

Junior Week II - July 13 - 17

Dramatized Bible Stories by the
Mt. Salem Men of Ministry

Youth Conference

June 29 - July 3



Randy Taylor



Randy Taylor, Jr.



Gary Lovens



Josiah Schroeder



Dennis Morrello



Josiah Hoover

- Live Gospel Music
- Great Preaching
- Patriotic Multimedia Presentation
- Fireworks Sky Show
(Thursday, July 2nd following the evening service)
- Concessions and Grillers



Dr. Randy E. Taylor
Evangelist/President



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



MT. SALEM REVIVAL GROUNDS REGISTRATION FORM 2026

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