



OMA INFORMATION AND MEMBERSHIP FORM – 2025

Camps should use the separate Camp Information and Membership Form. Thank You!

CONTACT INFORMATION

First and Last Name: _____ Role: _____

Phone Number: _____ Email Address: _____

Address: _____

Street

City

State

Zip Code

Camp Name: _____ District: _____

Additional Information from Congregational Members Only:

Church Name: _____ District: _____

Church Address: _____

Street

City

State

Zip Code

Phone Number: _____ Email Address: _____

Outdoor Ministry Association – 2024 Membership Levels and Benefits

	Camp (\$100-\$700)	Congregation (\$150)	Individual/Family (\$50)	Professional/Staff (\$100)	Lifetime (\$750)
At least one professional member & benefits	X				
\$25 Annual Retreat Discount (1 person)		X	X	X	1 st Year
Retreat Scholarships Available	X	X	X	X	
Staff and Volunteer Award Nominations	X				
Environmental Grants (up to \$1000; only \$500 w/o membership)	X	X			
Eligible for Four Horseman Fund Money	X	X		X	
Membership Certificate	X	X		X	X
OMA Decal	X	X	X	X	X

MEMBERSHIP INFORMATION

Select Membership Level:

- ☐ Individual/Family (\$50)
- ☐ Professional (\$100)
- ☐ Congregation (\$150)
- ☐ Lifetime (\$750)

Make checks payable to: Outdoor Ministries Association.

Send to: OMA-COB, P.O. Box 313, Petersburg, PA 16669.

DONATION INFORMATION

\$_____ Additional Donation for

- ☐ Annual Budget
- ☐ Four Horsemen Fund
- ☐ Environmental Grant Fund

\$_____ TOTAL ENCLOSED

(Membership + Any Additional Donation)

THANK YOU FOR YOUR SUPPORT OF CHURCH OF THE BRETHREN OUTDOOR MINISTRIES!