



2026 OMA INFORMATION AND CAMP MEMBERSHIP FORM

CONTACT INFORMATION

First and Last Name: _____ Role: _____

Phone Number: _____ Email Address: _____

Address: _____

Street

City

State

Zip Code

Camp Name: _____ District: _____

Camp Address(if Different from Above: _____

Street

City

State

Zip Code

Phone Number: _____ Email Address: _____

Outdoor Ministry Association – 2026 Membership Levels and Benefits

	Camp (\$100-\$700)	Camp Membership Example Calculation		
At least one professional member & benefits	<input checked="" type="checkbox"/>	Camp	Budget	Membership Due
\$25 Annual Retreat Discount (1 person)	<input type="checkbox"/>	A	\$100,000/1000	\$100
Retreat Scholarships Available	<input checked="" type="checkbox"/>	B	\$200,000/1000	\$200
Staff and Volunteer Award Nominations	<input checked="" type="checkbox"/>			
Environmental Grants (up to \$1000; only \$500 w/o membership)	<input checked="" type="checkbox"/>	Camp Name : _____		
Eligible for Four Horseman Fund Money	<input checked="" type="checkbox"/>	Your Budget: ____ /1000 = \$ _____		
Membership Certificate	<input checked="" type="checkbox"/>	(Your Membership Dues)		
OMA Decal	<input checked="" type="checkbox"/>			

MEMBERSHIP INFORMATION

Select Membership Level:

- Camp(\$100-\$700)

Make checks payable to: **Outdoor Ministries Association.**

Send to: **OMA-COB, P.O. Box 133, 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 BROTHERN OUTDOOR MINISTRIES!