

GOODTIDINGS GOSPEL CHAPEL

YOUNG PEOPLE'S MINISTRY PRESENTS:

MAIN CHARACTER

ENERGY

WINTER CAMP 2026

FEBRUARY 13-15TH

SPEAKER: JAMES CLIFFORD

**TUSCARORA INN & CONFERENCE
CENTER**

**3300 RIVER ROAD, MT. BETHEL, PA
18343**



REGISTER HERE

VIRTUAL REGISTRATION
FORM AVAILABLE AT THE
LINK BELOW

<https://forms.gle/LnKmWHBN1w3a9y6Y6>

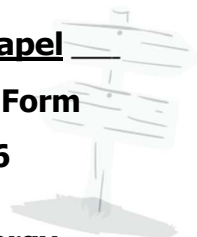
or use the QR Code



Good Tidings Gospel Chapel

Winter Camp Registration Form

February 13-15, 2026



Theme: **Main Character Energy**

Guest Speaker: James Clifford

Registration:

Deposit.....\$30
Age 3-12\$100
Age 13 +\$150

Personal Information:

Name: _____

Address: _____

City: _____ Zip code: _____

Date of Birth: _____ Age: _____

Contact Information:

Home Phone: _____

Cell Phone: _____

Email: _____



Parent/Guardian Information:

Name of Parent/Guardian: _____

Home Phone: _____

Cell Phone: _____

Email: _____

To Parents / Guardian:

wishes to participate in the Good Tidings Youth Group activities. These activities will take place under the guidance of direction of Good Tidings Youth Leader and volunteers of Good Tidings Youth Group. These activities will include christian centered talks and discussions, sports activities, counseling and singing. If your desire your child/ persons under your care to participate in Good Tidings Youth events please complete, sign and return this statement of consent and release liability by time of registration at the even location. As a parent/ legal guardian you remain full responsible for any legal responsibility which may result from any personal actions taken by the named participants. I understand that this consent can be terminated by me at any time in writing.

Statement of Consent and Release Liability

I hereby consent to the participation of _____, my child/person under my guardianship. in Good Tidings Youth Group events and activities described above. I fully understand that these events and or activities described will be under the supervision of the Designated Good Tidings Youth Leader and volunteers. I also give consent for emergency medical treatment if necessary. I do request that if possible I be contacted Prior to the treatment at the following:

Day: _____ Night: _____

Medical Insurance#: _____

Parent/Guardian Name: _____

Parent/ Guardian
Signature: _____ Date: _____

Tuscarora Inn & Conference Center
Lutheran Brethren Conference Center
3300 River Road, Mt. Bethel, PA 18343

Bus Leaves:

February 13 @ 6:30pm

Bus Returns:

February 15 @ 10:00pm



Things To Bring:

- Physical Bible
- Toiletries (Toothbrush, Toothpaste, Towel, Washcloth, etc.)
- Blanket
- Personal Medication (for asthma, allergy, headache)
- Layered and Comfortable Clothing.
- Sneakers/Running Shoes
- Writing Material (Pens, Pencil, Paper or notebook.

Things Not To Bring:

- Bad Attitude!!!
- Unwillingness to Participate

Dress-code: Please Dress Appropriately!!!

- No plunging necklines.
- No see-through clothing.
- No shorts/miniskirts/ minidresses.
- No sagging pants
- No offensive graphic-tees

Youth Leaders:

Richard Greenidge II, Omar Mason, Javir James, Kelly Ashley-Clarke Melissa Campbell Ayanna Williams