

Time to Finish the Work

An Upper Room Experience

In Preparation for The Latter Rain

August 7 – 12, 2019

Upper Room Experience 14 | Application Overview

Thank you for your interest in the Fourteenth-Annual Upper Room Experience! This camp meeting will be noticeably different, in that our beloved general and teacher –Elder Moses Mason– has been laid to rest. God has impressed us to continue forward, as we seek to honor the memory of His faithful manservant.

If you are applying as an individual, a couple, or for your family – you may use the form on the following pages to submit an initial application to register and secure your spot for this year’s camp meeting retreat. Maranatha!

- **Springville Camp & Conf. Center:** *3886 Mountain View Road, Odenville, AL 35120*
- **Dates:** *Tuesday, August 7th – Sunday, August 12th, 2019*
- **Airport:** *Birmingham-Shuttlesworth International Airport (see Section III, for more details)*

1. Please pay close attention to all of the details in each section of this application form.

2. **Send by Post Mail:** Send your completed application with any payments to

800 Snuff Branch Rd., Pulaski, TN 38478

3. **Remit Payments:** A deposit of $\frac{1}{3}$ of the total cost is due by **March 19th**. The second payment is due by **May 7th**, and the remaining balance is due by **July 2nd**. ***A \$25 late fee will be incurred after July 2nd.***

Upper Room Experience 14 | Application

I. Registrant Information

1. I am applying for (select one): *Myself* *My Roommate/Spouse and I* *My Entire Family*

2. Last Name: _____ First Name: _____

3. Email Address: _____@_____._____

4. Address: _____

City: _____ State: _____ Zip _____

5. Tel: (_____) _____ - _____ or (_____) _____ - _____

6. How many children (ages 5 and under) will be accompanying you? _____

What are their names/ages? _____

7. How many children (ages 6 - 11) will be accompanying you? _____

What are their names/ages? _____

8. How many adults (ages 12 and over) will be accompanying you? _____

What are their names/ages? _____

OFFICE USE ONLY

Post Mark _____ Check # _____ Deposit \$ _____ Notified _____

Upper Room Experience 14 | Application

II. Lodging and Meals

Cost for lodging and meals are packaged into one convenient price. These plans span the duration of the retreat (meals beginning Wednesday morning, and ending on Sunday afternoon with a sack lunch). Meals will be directed by our camp meeting kitchen staff. We serve a plant-based, vegetarian menu (free of milk and eggs); served twice a day. **Any child 5 years old and under, attends at no cost!**

*RV & TENT SITE

*This plan accommodates as many as your RV/tent will hold. Must provide all your personal supplies. Restrooms and showers are available on grounds. *Please note: limited RV sites*

Tent (no meals): \$75/Person Tent (w/ meals): \$200/Person RV option, add \$10/site

RV or Tent? _____ Number of Persons: _____ Number of RV Sites: _____

ON-CAMPUS DORMITORY

Each dormitory room has an open floor plan; 15 beds with shared community restrooms.

Guests are grouped by gender. Meals are included with this plan.

\$260/Adult \$145/Child (Ages 6-11)

Number of Adults: _____ Number of Children: _____

ON-CAMPUS MOTEL

For 2 or more persons. Rooms will be assigned based on the size of your family. Options include 2 queen size beds; 2 queens and 1 bunk bed; 1 queen, 1 full, 1 bunk bed; 4 bunk beds (full/twin)

All rooms have a private bathroom. Meals are included with this plan.

\$300/Adult \$190/Child (Ages 6-11)

Number of Adults: _____ Number of Children: _____

OFF CAMPUS, DAY-GUEST PASS

\$15/Guest (1 day) \$40/Guest (2+ days)

Number of Guests: _____ Number of Days: _____

ADD-ON MEALS, Day-Guests (*July 2nd deadline*)

Adults: \$25/day (\$100/retreat) Children (Ages 6-11): \$20/day (\$80/retreat)

Number of Adults: _____ Number of Children: _____ Number of Days: _____

Upper Room Experience 14 | Application

III. Accessibility and Accommodations

1. Do you have a disability and need a handicap-accessible room? [] Yes [] No

2. Please provide any requests you may need fulfilled, specific to your disability:

ATTENTION: To eliminate any confusion, ALL registrants who may need transportation to/from the airport/train/bus station should notify our transportation coordinator prior to purchasing your tickets. Please call Bro. Ricardo Parks at (256) 655-6256, or email parksabs@gmail.com, for additional transportation details.



Airport: *Birmingham-Shuttlesworth International Airport*



Amtrak Train Station: *1801 Morris Avenue, Birmingham, AL 35203*



Greyhound Bus Station: *618 19th St N, Birmingham, AL 35203*

Upper Room Experience 14 | Application

IV. Payment Calculator

Because of the pricing structure of this facility, there can be no other discounts given. If you stay on campus, the price for one day or for all six days is the same. We encourage you, if at all possible, to make plans to attend the full session.

1. Did you want to reserve: Tent Site

\$75 [no meals] × _____ [# of Persons] = _____ [Tent Site Subtotal]

\$200 [w/ meals] × _____ [# of Persons] = _____ [Tent Site Subtotal]

2. Did you want to reserve: RV Site

\$75 [no meals] × _____ [# of Persons] + \$10 [per Site] = _____ [RV Site Subtotal]

\$200 [w/ meals] × _____ [# of Persons] + \$10 [per Site] = _____ [RV Site Subtotal]

3. Did you want to reserve: On-campus Dormitory

\$260 × _____ [# of Adults] = _____

\$145 × _____ [# of Children] = _____ = _____ [Dormitory Subtotal]

4. Did you want to reserve: On-campus Motel

\$300 × _____ [# of Adults] = _____

\$190 × _____ [# of Children] = _____ = _____ [Motel Subtotal]

5. Did you want to reserve: Off-Campus, Day-Guest Pass(es)

\$15 [one day] × _____ [# of Guests] = _____ [1 Day-Guest Pass Subtotal]

\$40 [for 2+ days] × _____ [# of Guests] = _____ [Multi-Day-Guest Pass Subtotal]

Add-On Meals Adults: \$25/day (\$100/retreat) Children (Ages 6-11): \$20/day (\$80/retreat)

\$25 × _____ [# of Adults] × _____ [# of Days] = _____ [Adult Add-on Meals Subtotal]

\$20 × _____ [# of Children] × _____ [# of Days] = _____ [Child Add-on Meals Subtotal]

6. = _____ [TOTAL balance due] × $\frac{1}{3}$ = \$ _____ [Deposit Amount]

Upper Room Experience 14 | Application

V. Notes and Remitting Payment

Retreat Assistance Fund: If you would like to make a donation to help other families in need to attend the retreat, please indicate the amount here and include it with the payment you will remit for your deposit or total balance: \$ _____.

PLEASE NOTE: We need a completed application with payment of at least $\frac{1}{3}$ of your total retreat balance (refer to "Section IV #6") in order to secure your room reservation!

1. Please indicate what part of your balance you would like to submit a payment for:

I would like to deposit $\frac{1}{3}$ of my balance.

I would like to pay my balance in full.

I would like to make another payment toward my balance.

2. Payment by Credit Card: VISA MASTERCARD DISCOVER

Card Number: _____ - _____ - _____ - _____

Expiration Date: ____ / ____ [MM / YYYY] 3-Digit Security Code: _____

Total Amount to Charge: \$ _____.

3. Additional Payment Options:

Check or Money Order made payable to "Camp Meeting Account"

PayPal via online at either apocalypseministries.org or molministry.com

No Cash Accepted at this time; no exceptions. Thank you!

All praise be to God for His goodness and many mercies; as we gather together for our 14th Annual Camp Meeting Retreat! May God richly bless you and yours, as we earnestly prepare (with much prayer), reading and re-reading Early Writings, pgs. 269-272.

Send your completed application (pgs. 2-6) with payments to:

800 Snuff Branch Rd., Pulaski, TN 38478

Questions? Call: (931) 363-2059 or (256) 683-0959