RICHMOND LAKE BIBLE CAMP is a Christ-centered youth camp ministry. Northern Plains Baptist Church founded the camp in 1988 to provide a safe and fun learning environment for presenting the truths of God's Word to youth.

Registration is 2:00-4:00 p.m. at RLBC in the main building. All cell phones and medications will be turned in to the counselors.
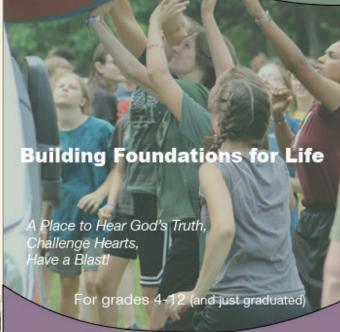
Great counselors & staff
A place to build memories
A place to grow!

COST: $140

Fill out form and make check payable to Northern Plains Baptist Church. Unless sending the check along with a church group, the form can be brought or mailed to the church address:

Northern Plains Baptist Church
1604 S. Melgaard Road
Aberdeen, SD 57401

Name _____

Address _____

City _____ State _____ Zip _____

Parent(s) _____

Email _____

Phone (___) _____ (___) _____

Age _____ Grade (fall 2024) _____ Male / Female

CAMP T-SHIRTS AVAILABLE FOR $12

Camp Address:
Richmond Lake Youth Camp
37925 Youth Camp Rd.
Aberdeen, SD 57401

Richmond Lake Bible Camp

June 24 - 29

Building Foundations for Life

A Place to Hear God's Truth, Challenge Hearts, Have a Blast!

For grades 4-12 (and just graduated)

- Field Sports
- Fun Activities
- Team Competition
- Swimming

- Airsoft War
- Great Preaching Services
- Midnight Madness Fun

Dave Young
Evangelist, Speaker

Neil Hannahs
Pastor, Camp Director

ITEMS NOT TO BRING

Alcohol or drugs
Cigarettes
Knives or firearms
Vapes
Fireworks

GIRLS
Knee-length basketball shorts, skirts, or loose-fitting gym pants.

BOYS
Shorts, jeans, or gym pants

ITEMS TO BRING

KJV Bible
Sleeping bag, pillow
Toiletries
Bath towel
Swim towel
Jacket
Gym shoes
Swimsuit
Sunscreen
Insect repellant
Spending money for canteen ($25 is average)
Love offering for speaker
Airsoft equipment, if participating (girls must have full face masks)

FRIDAY FUNDAY

Friday will be face paint day!

I will not hold Northern Plains Baptist Church liable for any loss, damage, or injury to person or property. I release the camp and NPBC, including all staff, from any injury and assume the risks at activities. Parents will be contacted if medical treatment is necessary. I understand that I will be expected to pay any medical expenses.

Parent/Guardian Signature

_____

Date _____

Emergency # _____ _____