

International Ministries at Penn State
Hiking at Ricketts Glen State Park
Sat., April 19, 2008

We will leave from the HUB (the side near the Post Office) promptly at 9:00 AM on Saturday, April 19, and drive 2 hours north and east to Red Rock, PA. Before hiking we will stop at a small store in Red Rock, where you can buy food for lunch, before continuing a short distance (3 miles) to Ricketts Glen State Park. We will spend a few hours hiking there and enjoying the beautiful springtime. Ricketts Glen State Park has 26 miles of hiking trails of various difficulties. We will walk on the Falls Trail, which goes beside 18 waterfalls (ranging in height from 11 feet to 94 feet). The total hike distance is about 4 miles. (If you want, you could bring some food to eat for lunch. You should also plan to bring a container for drinking water, particularly when hiking.) We will plan to return to State College by 5 PM.

To register for this trip, complete the trip registration form below and return it to me with your payment. The transportation cost for this trip is only \$20. The 28 available spaces will go to those who are first to pay the \$20 cost, so I encourage you to respond promptly. (Make checks payable to "Bill Saxton". If I am not in my office when you come, you can slide a check or envelope with cash under my office door and I will send you a receipt confirming I received it and that you are registered for the trip.) Note: In the event rain is forecast for that day, this trip will be postponed, or canceled and your payment returned to you. I will be praying for nice weather, as I would enjoy spending the day hiking with you!

Bill Saxton
210A Eisenhower Chapel Office phone: 865-1935 Email address:wjs9@psu.edu

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IMPS Ricketts Glen Hiking Trip Spring 2008 Registration Form

Name: (Mr. Ms. Dr.) _____ Male/Female: _____
(circle the proper title) (circle the name you would like to be called)

Local Address _____ Office/Lab Address: _____

Home Phone: _____ Office/Lab Phone: _____

Age: _____ Email address: _____

Are you: (check one) Visiting Scholar Grad Student (For PhD? Y/ N)

Intensive English Undergrad Student

Major/Field of Specialization: _____ Home Country: _____

In case of emergency, contact: _____ Phone: (____) _____

List any medical issues, special needs or other items of concern: _____

Please read and sign:

In consideration for being allowed to participate in this activity, I personally assume responsibility for my actions (and my accompanying family members), and release the staff and agents of International Ministries and associated organizations from responsibility for any loss, injury, or damage to myself, my family or my property, provided such persons shall act with reasonable care for the safety of me, my family and my property. Should any dispute or controversy arise, I agree to seek resolution according to Biblical principles through a Christian reconciliation service.

Signature: _____ Date: _____