Delegate and Staff Registration

Spirit of Timothy Division

Reverend Charles Faulks, Coordinator

NATIONAL BAPTIST CONVENTION, USA, INC.

DR. JERRY YOUNG, President

DR. CALVIN MCKINNEY, General Secretary

ANNUAL SESSION

Date _____ Convening With _____

_____

Personal ID Number

REPRESENTATION: ❑ PERSONAL ❑ STAFF | POSITION/TITLE: _____

Full Name _____

Address _____

City _____ State_____ Zip Code _____

Office Phone_____ Home Phone_____ Cell Phone _____

E-Mail Address _____

REGISTRATION	AMOUNT	CODE	RECEIVED
Personal & Staff Representation (annually due in September)	$100.00	18000	$
Offering			$
Other _____			$
Other _____			$
		TOTAL RECEIVED	$

METHOD OF PAYMENT: ❒ Check – Check Number _____ ❒ Cash – Onsite Only

Payable to: National Baptist Convention, USA, Inc. **(DO NOT MAIL CASH)**

❒ Credit Card – Name on Card _____ Signature/Date: _____

(Cards Accepted: MC, Visa)

Card Number: _____ Expiration Date: _____

Received By: _____ Date Received: _____

PLEASE RETURN FORM TO:

NATIONAL BAPTIST CONVENTION, USA, INC. REGISTRATION OFFICE

1700 Baptist World Center Drive – Nashville, TN 37207 - (615) 228-6292

(White: Registration/Finance | Yellow: Auxiliary | Pink: Delegate)