

Date: _____



National Baptist Convention, USA, Inc.

Dr. Jerry Young, President

**DELEGATE REGISTRATION
PARENT BODY**

MIDWINTER BOARD

Convening with _____

Church ID#	For State Conventions Only State ID#
Church _____	State Convention _____
Pastor _____	President _____
Church Address _____	Convention Address _____
City _____ State _____ Zip _____	City _____ State _____ Zip _____
Church Telephone and Fax Number _____	Convention Telephone and Fax Number _____
Pastor Telephone and Mobile Number _____	President Telephone and Mobile Number _____
Email or Web Site Address _____	Email or Web Site Address _____

Representation Categories

CATEGORY	CODE	FEEs	AMOUNT CONTRIBUTED
Church	1000	\$400.00 Minimum	\$
Pastor/Preachers	1001	\$100.00	\$
Officers	1002	\$300.00	\$
Board Members	1003	\$200.00	\$
State Convention	1004	\$2,000.00	\$
Personal	1005	\$100.00	\$
TOTAL			\$

Special Contributions

CATEGORY	CODE	AMOUNT CONTRIBUTED	CATEGORY	CODE	AMOUNT CONTRIBUTED
Home Mission	3001	\$	World Baptist Center	3005	\$
Foreign Mission	3002	\$	Haiti Relief (specify)	3006	\$
American Baptist College	3003	\$	Technology Ministry (Website)	3007	\$
Special Contributions (specify)	3004	\$	Monthly Giving	3008	\$
Other (specify) _____		\$	Alabama Tornado Relief	3033	\$
			Total		\$

METHOD OF PAYMENT: ___ Check - Check# ___ ___ Cash - Onsite Only ___

Received by: _____ **Date Received** _____

DELEGATE REGISTRATION

(Please Print or Type)

Date _____ Convening With _____

No. of Delegates: _____

State Convention ID Number _____	Church ID Number _____
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