



108th Annual Session of the National Baptist Congress of Christian Education

St. Louis, Missouri • June 17-21, 2013

President

Dr. George W. Waddles Sr.

Dean

Dr. Elliott Cuff

General Secretary

Dr. Doretha P. Johnson

Dr. Julius R. Scruggs, Convention President

Instructions for Completing the Registration Form

SECTION 1 – CATEGORY

Place a check (✓) in the box to the left of the category that matches the number of delegates who will be attending from your organization.

Pastor, children and youth attendees, and National Congress faculty and staff must be included in your delegate count.

DO NOT INCLUDE ANY OF THE FOLLOWING SPECIAL FEES WITH YOUR REGISTRATION FEE (AS THEY ARE TO BE PAID ON-SITE):

- Minister's Division
- Laymen's League
- Children and/or Youth Rally
- Special or Advanced Projects (Lucie Campbell Music Workshop, Secretary/Clerk, etc.)
- Any other sessions requiring additional fees

NOTE: All National Congress faculty (CF), Dean's staff (DS), or other Congress staff (CS) MUST register with an organization with the minimal registration fee of \$500.00 (for example, a Category 1 or above church).

SECTION 2 – ORGANIZATION IDENTIFICATION

(Please type or print legibly.)

Date: the date when the form is being completed (preregistration) or submitted on-site.

Number of Delegates: the number of delegates that is listed in Section 3 of this form.

Church/Congress/Individual Name: the complete name of the organization or person that is being registered, either a church, District/State Congress, or single (1) delegate.

Church Address: the complete address for the church.

Alternate Mailing Information: the complete name and address to return the preregistration materials (receipt, badges, admit cards), if different from the church address.

Phone, FAX, and e-mail--include area codes and complete e-mail address.

District Association, State Convention, State President--include this information (if affiliated).

SECTION 3 – COURSE SELECTION FORM

(Please type or print legibly.)

Provide delegate name and class selected from Course booklet; include a first and second choice. Pastor, children and youth, and National Congress faculty and/or staff must be included in this section.

For Congress Staff, put "CS" as the course name; for Dean's Staff, put "DS"; or for Congress Faculty, put "CF" as the course name (not the name of the courses they teach).

For more than 15 delegates, please duplicate page 4 as needed.

REFUND/RETURNED CHECK POLICY

No refunds will be granted to preregistered churches. However, those churches which are unable to attend the Congress due to unforeseen circumstances may be given credit on next year's Congress registration only. Requests for credit must be sent to the Registration Office and postmarked no later than July 5, 2013.

In order to receive a credit, the church must return all registration materials (including badges, class admit slips, and receipts) to the Registration Office. No partial credit will be given to churches failing to send the total number of delegates pre-registered. If your check is returned by the bank for any reason, the new payment must be made by money order or certified check.

Online Registration

Register online at www.nationalbaptist.com.
Online registration for the 2013 Congress of Christian Education will be available through May 31, 2013.
Visa and MasterCard charge cards accepted.



National Baptist Congress of Christian Education June 17-21, 2013

Preregistration Deadline: April 30, 2013

Please complete Sections 1, 2, and 3 of this Registration Form (see page 1 for instructions) and mail along with your check or money order--made payable to: **National Baptist Congress**.

Mail to: National Baptist Congress Registration, P. O. Box 769, Fort Mill, SC 29716.

If you have not received your badges and other materials in 21 days, or if you have questions, please call 803-396-0805.

Section I – Please select and check one of the following categories:

Check 1	Category	Number of Delegates	Registration Fee
	A1	100 or more delegates	\$1,200
	A2	75 – 99 delegates	\$1,000
	A3	50 – 74 delegates	\$900
	A4	25 – 49 delegates	\$800
	A5	11 – 24 delegates	\$700
	1	7 – 10 delegates (required level for faculty and staff)	\$500
	2	4 – 6 delegates	\$400
	3	1 – 3 delegates	\$350
	District	Up to 3 delegates (\$25 for each additional delegate over 3)	\$550
	State	Up to 5 delegates (\$25 for each additional delegate over 5)	\$700
	Individual	1 delegate	\$175

Section 2 – Organizational Identification – (PLEASE TYPE OR PRINT LEGIBLY)

Date: ____/____/2013 Number of Delegates: _____

Church, Congress, or Individual Name: _____

Pastor's or President's Name: () Rev. () Dr. _____

Church Address: _____
(P.O. Box or Street Address) (City/State/Zip)

Phone #: _____ Fax #: _____ E-mail: _____

Alternate Mailing Information (to receive Registration Materials, if different from above):

Name: _____

Mailing Address: _____
(P.O. Box or Street Address) (City/State/Zip)

District Association: _____

State Convention: _____ State President: _____

FOR OFFICIAL USE ONLY (Do not complete the section below. Congress staff will complete certification.)

Amount Received: \$ _____ Check _____ Money Order _____ Cash _____ Ref. # _____
 Date Received: ____/____/_____
 Greeter Initial: _____ Cashier Initial: _____ Data Entry Initial: _____ Congress ID#: _____

2013 National Baptist Congress of Christian Education

Section 3 – Course Selection Form

Name of Organization (church, district or state): _____

Address: _____

City: _____ State: _____ Zip: _____

(Please Type or Print Legibly)

1. **Delegate's Name** (Title, First Name, Middle Initial, Last Name): _____

First Choice Course Number: _____ Course Name: _____

Alternate Course Number: _____ Alternate Course Name: _____

2. **Delegate's Name** (Title, First Name, Middle Initial, Last Name): _____

First Choice Course Number: _____ Course Name: _____

Alternate Course Number: _____ Alternate Course Name: _____

3. **Delegate's Name** (Title, First Name, Middle Initial, Last Name): _____

First Choice Course Number: _____ Course Name: _____

Alternate Course Number: _____ Alternate Course Name: _____

4. **Delegate's Name** (Title, First Name, Middle Initial, Last Name): _____

First Choice Course Number: _____ Course Name: _____

Alternate Course Number: _____ Alternate Course Name: _____

5. **Delegate's Name** (Title, First Name, Middle Initial, Last Name): _____

First Choice Course Number: _____ Course Name: _____

Alternate Course Number: _____ Alternate Course Name: _____

6. **Delegate's Name** (Title, First Name, Middle Initial, Last Name): _____

First Choice Course Number: _____ Course Name: _____

Alternate Course Number: _____ Alternate Course Name: _____

7. **Delegate's Name** (Title, First Name, Middle Initial, Last Name): _____

First Choice Course Number: _____ Course Name: _____

Alternate Course Number: _____ Alternate Course Name: _____

8. **Delegate's Name** (Title, First Name, Middle Initial, Last Name): _____

First Choice Course Number: _____ Course Name: _____

Alternate Course Number: _____ Alternate Course Name: _____

2013 National Baptist Congress of Christian Education
Section 3 – Course Selection Form (Page ____)

Name of Organization (church, district or state): _____

City: _____ State: _____ Zip _____

(Please Type or Print Legibly)

9. **Delegate's Name** (Title, First Name, Middle Initial, Last Name): _____

First Choice Course Number: _____ Course Name: _____

Alternate Course Number: _____ Alternate Course Name: _____

10. **Delegate's Name** (Title, First Name, Middle Initial, Last Name): _____

First Choice Course Number: _____ Course Name: _____

Alternate Course Number: _____ Alternate Course Name: _____

11. **Delegate's Name** (Title, First Name, Middle Initial, Last Name): _____

First Choice Course Number: _____ Course Name: _____

Alternate Course Number: _____ Alternate Course Name: _____

12. **Delegate's Name** (Title, First Name, Middle Initial, Last Name): _____

First Choice Course Number: _____ Course Name: _____

Alternate Course Number: _____ Alternate Course Name: _____

13. **Delegate's Name** (Title, First Name, Middle Initial, Last Name): _____

First Choice Course Number: _____ Course Name: _____

Alternate Course Number: _____ Alternate Course Name: _____

14. **Delegate's Name** (Title, First Name, Middle Initial, Last Name): _____

First Choice Course Number: _____ Course Name: _____

Alternate Course Number: _____ Alternate Course Name: _____

15. **Delegate's Name** (Title, First Name, Middle Initial, Last Name): _____

First Choice Course Number: _____ Course Name: _____

Alternate Course Number: _____ Alternate Course Name: _____

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