

National Baptist Convention, USA, Inc.

Dr. Jerry Young, PRESIDENT

DELEGATE REGISTRATION

PARENT BODY

Date:

Dr. Calvin McKinney, GENERAL SECRETARY ANNUAL SESSION

September 2-6, 2019 New Orleans, LA

Pre-registration Deadline: August 9, 2019

| Church ID# | For State Conventions Only State ID# | | | | |
|------------------------------------|---------------------------------------|--|--|--|--|
| (Please Type or Print Clearly) | (Please Type or Print Clearly) | | | | |
| 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 website address | Email or website address | | | | |

Representation Categories

| CATEGORY | CODE | FEES | AMOUNT CONTRIBUTED |
|------------------|------|------------------|--------------------|
| Church | 1010 | \$400.00 Minimum | \$ |
| Pastor/Preachers | 1011 | \$100.00 | \$ |
| Officers | 1012 | \$300.00 | \$ |
| Board Members | 1013 | \$200.00 | \$ |
| State Convention | 1014 | \$2,000.00 | \$ |
| Personal | 1015 | \$100.00 | \$ |
| TOTAL | | | \$ |

| Special Contributions | | | | | |
|---------------------------|------|-----------------|-----------------|-------|-----------------|
| CATEGORY | CODE | AMT CONTRIBUTED | CATEGORY | CODE | AMT CONTRIBUTED |
| Home Mission | 3001 | \$ | Monthly Giving | 3008 | \$ |
| Foreign Mission | 3002 | \$ | Special Appeal | 3054 | \$ |
| American Baptist College | 3003 | \$ | Other (Specify) | | \$ |
| Disaster Relief (specify) | 3034 | \$ | | | \$ |
| | · | | 4 | Total | \$ |

Representation Fee Levels

| | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
|-----------------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| Less Than 200 Members | \$400 | \$425 | \$450 | \$475 | \$500 | \$525 | \$550 | \$575 | \$600 |
| 201- 500 Members | \$601 | \$625 | \$650 | \$675 | \$700 | \$725 | \$750 | \$775 | \$800 |
| 501 -1000 Members | \$801 | \$825 | \$850 | \$875 | \$900 | \$925 | \$950 | \$975 | \$1000 |
| 1001 & Above | \$1600 | \$1625 | \$1650 | \$1675 | \$1700 | \$1725 | \$1750 | \$1775 | \$1800 |

[FOR OFFICE USE ONLY]

(WHITE-Finance Office; Yellow-Church; Pink-Registration)

METHOD OF PAYMENT: ___ Check – Check#_____ Cash – Onsite Only____

Received by:

Date Received

DELEGATES

Additional Delegates - Attach Additional Sheets if Needed

(Please Type or Print Clearly)

| Name | | | | | |
|---|----------------|--|--|--|--|
| Address | City/State/Zip | | | | |
| Name | | | | | |
| Address | City/State/Zip | | | | |
| Name | | | | | |
| Address | City/State/Zip | | | | |
| Name | | | | | |
| Address | City/State/Zip | | | | |
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| Name | | | | | |
| Address | City/State/Zip | | | | |
| Name | | | | | |
| Address | City/State/Zip | | | | |
| Name | | | | | |
| Address | City/State/Zip | | | | |
| Please Return This Form Completed and Intact To: National Baptist Convention, USA, Inc. 1700 Baptist World Center Drive – Nashville, TN 37207 ATTN: Jeanette Tatman, Finance Office Manager 866-531-3054 (toll free) or 615-301-2224 – Your questions are welcome Make Checks Payable to: NATIONAL BAPTIST CONVENTION, USA, INC. DO NOT MAIL CASH | | | | | |
| IMPORTANT: Your Church or State Convention ID # is located on the label of the envelope received with this brochure; please make sure you have written this number on your registration form prior to submitting to our office. | | | | | |