

Delegate Registration

Moderators' Division

Dr. Cleveland McFarland, Jr., President



NATIONAL BAPTIST CONVENTION, USA, INC.

DR. JERRY YOUNG, President

DR. ALVIN EDWARDS, General Secretary

Date _____ Convening With _____

 Personal ID Number

- Mid-Winter Board Meeting
- Congress of Christian Education
- Annual Session

State Convention _____ President _____

SECTION A: STAFF

Name _____ Address _____

City _____ State _____ Zip Code _____

Office Phone _____ Home Phone _____ Cell Phone _____

E-Mail Address _____

Position/Title _____

SECTION B: DISTRICT ASSOCIATION REPRESENTATION

District Name _____ Moderator's Name _____

Address _____ City _____ State _____ Zip Code _____

Office Phone _____ Home Phone _____ Cell Phone _____

E-Mail Address _____

District Secretary _____ Address _____

City _____ State _____ Zip Code _____ Telephone No. _____

SECTION C: PERSONAL REPRESENTATION

Name _____ Address _____

City _____ State _____ Zip Code _____

Office Phone _____ Home Phone _____ Cell Phone _____

E-Mail Address _____

REGISTRATION	JANUARY	JUNE	SEPTEMBER	CODE	RECEIVED
District Association	\$300.00	\$300.00	\$400.00	004001	\$
Personal Representation	\$100.00	\$100.00	\$200.00	004002	\$
World Baptist Center				004003	\$
Other Donations				004004	\$
TOTAL RECEIVED					\$

METHOD OF PAYMENT: Check – Check Number _____ Payable to: National Baptist Convention, USA, Inc. Cash – Onsite Only (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 AND FEES TO:
NATIONAL BAPTIST CONVENTION, USA, INC. REGISTRATION OFFICE
 1700 Baptist World Center Drive – Nashville, TN 37207 - (615) 228-6292