GENERAL MISSIONARY BAPTIST CONVENTION OF GEORGIA, INC. P. O. Box 92340 Atlanta, GA 30314

Α	SSOCIAT	TION REGISTRATION FORI	M	
District		#:		Select One Annual Session Adjourned Session Other
Name of Association:				
Moderator's Name:				
Mailing Address:				
City:		State:		
Phone: ()		Mobile: ()	
E-mail Address:				
Associa	ation Regist	ration: \$200.00 (Each Delegate	\$35.00 <u>)</u>	
	AD	DD ADDITIONAL DELIGATES		
		ON PAGE(2)		
Laymen's Auxiliary Home Missions	\$ \$	Women's Auxiliary Foreign Missions		\$ \$
		Association Registration Total	\$	
		Personal Registration Total fro		
		TOTAL ALL ASSOCIATIONAL PA	YMENTS	\$
President of Women's Department: _		Pho	one:	
President of Laymen's Department: _		Pho	one:	
Number of Churches in Association _ Number of Pastors				
		Onl		Cash do not mail
OFFICIAL USE ONLY:				
Received By:		Date:		

ASSOCIATION DELEGATE REGISTRATION FORM

Additional Delegates: \$35.00 per person

Name:	Phone:			_
Address:	City:	ST:	Zip:	
Email Address:				
	Phone:			_
Address:	City:	ST:	Zip:	
Email Address:				
Name:	Phone:			_
Address:	City:	ST:	Zip:	
Email Address:				
	Phone:			_
Address:	City:	ST:	Zip:	
Email Address:				
Name:	Phone:			_
Address:	City:	ST:	Zip:	
Email Address:				
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Email Address:				
Name:	Phone:			_
Address:	City:	ST:	Zip:	
Email Address:				
Name:	Phone:			_
Address:	City:	ST:	Zip:	
Email Address:		·		
	Phone:			_
Address:	City:	ST:	Zip:	
Email Address:				