



THE VIRGINIA BAPTIST STATE CONVENTION, INC.
MACEDONIA CHURCH PROGRAM REGISTRATION FORM
145TH ANNUAL SESSION - MAY 14-17, 2012

INSTRUCTIONS

Please type or print legibly in sections that apply. To pre-register, this form and appropriate registration fees must be submitted by **April 27th 2012**. Please mail to: The Virginia Baptist State Convention, Inc., 3500 South 19th Street, Arlington, Virginia, 22204

SECTION I - INFORMATION

***Registration Form Completed By:** First Name: _____ Last Name: _____ Phone Number: _____
 Church Name: _____ Pastor's Name: _____
 Church Address: _____ City: _____ State: _____ Zip: _____
 Church Phone Number: _____ Church Email Address: _____
 Association Name: _____ Moderator's Name: _____
 Address: _____ City: _____ State: _____ Zip: _____
 Phone Number: _____ Fax Number: _____

PLEASE SELECT YOUR CHURCH AFFILIATION

- | | | | |
|------------------------------------------------------------------------|-------------------------------------------------------------------|-------------------------------------------------------------|-----------------------------------------------------------------|
| <input type="checkbox"/> Progressive National Baptist Convention, Inc. | <input type="checkbox"/> National Baptist Convention U.S.A., Inc. | <input type="checkbox"/> Lott Carey Baptist Foreign Mission | <input type="checkbox"/> National Baptist Convention of America |
| <input type="checkbox"/> National Missionary Baptist | <input type="checkbox"/> American Baptist | <input type="checkbox"/> Full Gospel Baptist | <input type="checkbox"/> Southern Baptist |

SECTION II - CHURCH MEMBERSHIP AND MONTHLY CONTRIBUTION: PLEASE CHECK ONE

CHURCH MEMBERSHIP COUNT

- 1-100 MEMBERS 101-500 MEMBERS 501-999 MEMBERS 1000-1499 MEMBERS 1500+ MEMBERS

Macedonia Church Program, Monthly Amount \$ _____

SECTION IV - VOTING DELEGATES - EACH CHURCH IS ENTITLED TO 10 VOTING DELEGATES. FEES FOR 4 DELEGATES ARE INCLUDED WITH YOUR REGISTRATION. FOR EACH OF THE ADDITIONAL 6 VOTING DELEGATES, A FEE OF \$25 MUST BE PAID. ALL OTHER REGISTRATIONS ARE NONVOTING.

Name: _____	Address: _____
Name: _____	Address: _____
Name: _____	Address: _____
Name: _____	Address: _____

ADDITIONAL DELEGATES

Name: _____	Address: _____
Name: _____	Address: _____
Name: _____	Address: _____
Name: _____	Address: _____
Name: _____	Address: _____
Name: _____	Address: _____

Enter Total Amount Due for Additional Delegates _____

SECTION V - MEMORIAL - DECEASED MEMBERS

Name: _____	Name: _____
Name: _____	Name: _____
Name: _____	Name: _____

FOR THE VIRGINIA BAPTIST STATE CONVENTION, INC., USE ONLY

Reviewed By: _____ Initials: _____