

FLORIDA GENERAL BAPTIST CONGRESS OF CHRISTIAN EDUCATION

Auxiliary to the Florida General Baptist Convention

Rev. Dr. James B. Sampson, Convention President

Rev. Jimmie L. Bryant, Congress President

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OFFICIAL REGISTRATION FORM

P. O. Box 11706 * Daytona Beach, FL 32120

Date: _____, 20__

The _____ Baptist Church

Association _____

Church Address _____

The District Congress of _____ Association

City _____ State _____ Zip _____

Congress Address _____

Church Phone: Area Code () _____

City _____ State _____ Zip _____

Send greetings and the following delegates to the

Send greetings and the following delegates to the

Congress held in _____

Congress held in _____

(Delegates are eligible to take a morning course, and participate in an afternoon workshop related to the course or any special project for which they are qualified.)

NAME OF DELEGATES List Titles (Rev., Dr., Mrs., Miss.)	ADDRESS City / State / Zip Code	COURSE NO. DESIRED
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		

CONGRESS ENROLLMENT (See Enclosed Registration Fee Form) \$ _____

Florida Memorial College \$ _____	Foreign Mission \$ _____	Ministers Division \$ _____
Virgin Island Missions \$ _____	Family Life Retreat \$ _____	Minister's Wives \$ _____
Children/Youth Rally Enrollmt (\$7) \$ _____	Pageant Tickets (\$10) \$ _____	Scholarship Luncheon \$ _____

Tee Shirts # _____ Size _____ Tee Shirts # _____ Size _____ Other Size _____ **Total Tee Shirts # _____ (\$10) \$ _____**

TOTAL AMOUNT PAID \$ _____

Total number enrolled in your:	Pastor _____
Sunday School _____ BTU/NBC _____	Address _____
Superintendent _____	President _____
Address _____	Address _____
Director _____	Dean _____
Address _____	Address _____

(FGBCI Office Use Only)

Finance Staff Signature: _____ Check No. _____ Amount: \$ _____ Cash: \$ _____ Total: \$ _____

White Copy - Hdqtrs. Office

Yellow Copy - Congress Registrar

Pink Copy Receipt

(Revised 4/11)