

Church Enrollment

Church Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____

Pastor's Name _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____

Email _____

Amount Enclosed \$ _____

Please print form and mail to:

5340 Jewella Avenue

Shreveport, LA 71109

Attn. Mrs. Odessa White

For Additional Information call 318-636-6172 or 318-636-5356

Dr. Robert C. Hudson, Moderator