REGISTRATION FORM: 13TH DISTRICT CONGRESS OF CHRISTIAN EDUCATION

PLEASE TYPE OR PRINT AII INFORMATION. Forms can be printed and filled in by hand.

NAME OF CHURCH_____ PHONE NO._____

CHURCH ADDRESS _____

Street City/State Zip

FAX NUMBER _____ E-MAIL ADDRESS_____

PASTOR _____PHONE NO._____

Registration Fee Enclosed $_____ Number of Delegates _____

DELEGATE NAME	ADDRESS/ZIP	PHONE NUMBER	COURSE #

Please print and mail <u>Registration Form and Payment</u> to:

13th District Missionary Baptist Association * 5340 Jewella Avenue * Shreveport, LA 71109

or drop off at 5340 Jewella Avenue ... Do not send cash in the mail.