



# Florida General Baptist Convention, Inc

Rev. Dr. James B. Sampson, President

## OFFICIAL PARENT BODY REGISTRATION

Date: \_\_\_\_\_

Session: \_\_\_\_\_

Location of Session: \_\_\_\_\_

Because this form is used for multiple types of payment, please list the name of each person for which you are paying. Also, indicate what the payment is for next to the name.

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

**Note:**  
ALL Pastors/Ministers are to *personally* register with the same amount of money, regardless of title or position.

Personal Pre-Registration: \$40.00

(Pre-Registration Deadline March 8, 2010)

Personal On-Site Registration: \$50.00

### Designated For:

Description	Ck#	Amt.	Description	Ck#	Amt.	Description	Ck#	Amt.
Pwr 20 Church		\$	FL Meml Univ		\$	Scholarship		\$
Pwr 20 Pastor		\$	Foreign Mission		\$	Solidarity		\$
Association		\$	Home Mission		\$	Virgin Island		\$
Moderator		\$	Late Night		\$	Young Pastors		\$
1st Vice Mod		\$	Public Offering		\$	Disaster Relief		\$
2nd Vice Mod		\$	Retreat Site		\$	Other		\$

CHECK(S) = \$ \_\_\_\_\_

CASH = \$ \_\_\_\_\_

TOTAL = \$ \_\_\_\_\_

Pastor's Name: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Church Name: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Church Address: \_\_\_\_\_ Email: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Pastor's Address: \_\_\_\_\_ Email: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Association: \_\_\_\_\_ Moderator's Name: \_\_\_\_\_

(FGBCI Office Use Only)

Received By: \_\_\_\_\_ Check # \_\_\_\_\_ Amount: \$ \_\_\_\_\_ Cash: \$ \_\_\_\_\_ Total: \$ \_\_\_\_\_