

**MID-YEAR SESSION
OF THE
PROVIDENCE REGULAR MISSIONARY BAPTIST ASSOCIATION
REGISTRATION FEE IS \$75.00**

PLEASE PRINT

DATE _____, 20____

CHURCH NAME: _____

ADDRESS: _____

PHONE NUMBER: _____

PASTOR: _____

ADDRESS: _____

PHONE NUMBER: _____

SUB-DISTRICT: _____

DELEGATES

ALTERNATE: _____

CLERKS NAME, ADDRESS & PHONE NUMBER

AMOUNT SENT: _____