

# OFFICIAL 2024 FLORIDA STATE PRIMITIVE BAPTIST CONVENTION

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## CHURCH REGISTRATION FORM

Elder Al Ware, Financial Secretary (727) 415-4866-----Mail to: P. O. Box 16823, Saint Petersburg, FL. 33733

**E-mails: aware904@gmail.com** PRE-REGISTRATION DEADLINE IS MARCH 1<sup>st</sup>

CHECK WHICH APPLIES     Summer     Winter     One Day Session     April Convention

ASSOCIATION REPORT    \$     CHURCH SCHOOL CONVENTION    \$

|                                       |                                       |
|---------------------------------------|---------------------------------------|
| Church _____                          | Pastor _____                          |
| Address _____                         | Address _____                         |
| City _____ State _____ Zip Code _____ | City _____ State _____ Zip Code _____ |
| E-mail _____ Phone ( ) _____          | E-Mail _____ Phone ( ) _____          |

Number of Members \_\_\_\_\_ Association \_\_\_\_\_

Complete the form in its entirety, checking all that apply. Registration includes a badge, admittance to the Convention, program, and other materials. Your badge will be required at all functions. The Pastor is included in the registration and counts as one delegate. Registration received on or before March 15th will receive Convention materials. Registrations received after the deadline will receive materials if they are in attendance. A separate registration form is provided for the MORTUARY and INDIVIDUALS. **CHURCHES MUST REGISTER WITH A MINIMUM OF \$100.00 WITH THE SCHOLARSHIP FUND IN ORDER FOR AN APPLICANT TO BE CONSIDERED.**

| CHURCH MEMBERS       | REQUIRED REPORTING AMOUNT        | NUMBER OF PARENT BODY VOTING DELEGATES | TOTAL AMOUNT |
|----------------------|----------------------------------|--|--------------|
| <b>AA2, OVER 500</b> | \$1400.00--350.00 Per Quarter    | Ten (10) Delegates                     | \$           |
| <b>AA1, OVER 400</b> | \$1200.00--\$300.00 Per Quarter  | Eight (8) Delegates                    | \$           |
| <b>AA, OVER 300</b>  | \$1,000.00--\$250.00 Per Quarter | Six (6) Delegates                      | \$           |
| <b>A, OVER 200</b>   | \$800.00--\$200.00 Per Quarter   | Five (5) Delegates                     | \$           |
| <b>B, OVER 100</b>   | \$600.00--\$150.00 Per Quarter   | Four (4) Delegates                     | \$           |
| <b>C, OVER 25</b>    | \$400.00--\$100.00 Per Quarter   | Three (3) Delegates                    | \$           |

(List Delegates below who are included in the registration for the Parent Body and who will attend. (Additional Deacons or delegates should use the individual registration form and register with \$50.00. Attach additional forms if needed.)

| Attending (Circle Y-(Yes) N (No)) |     | Attending (Circle Y-(Yes) N (No)) |     |
|-----------------------------------|-----|-----------------------------------|-----|
| NAME                              | Y N | NAME                              | Y N |
| NAME                              | Y N | NAME                              | Y N |
| NAME                              | Y N | NAME                              | Y N |
| NAME                              | Y N | NAME                              | Y N |
| NAME                              | Y N | NAME                              | Y N |

### LOCAL CHURCH SCHOOL REGISTRATION

|                          |    |                        |    |
|--------------------------|----|------------------------|----|
| AA2-\$175.00 6-Delegates | \$ | A-\$100.00 3-Delegates | \$ |
| AA1-\$150.00 5-Delegates | \$ | B-\$75.00 2-Delegates  | \$ |
| AA- \$125.00 4-Delegates | \$ | C-\$50.00 1-Delegates  | \$ |

List Delegates (Additional delegates, add \$25.00. Register with the general Convention or Auxiliary for Convention materials.)

|            |            |
|------------|------------|
| NAME _____ | NAME _____ |
| NAME _____ | NAME _____ |
| NAME _____ | NAME _____ |

| CATEGORY                          | AMOUNT | CATEGORY                     | AMOUNT |
|-----------------------------------|--------|------------------------------|--------|
| Scholarship Luncheon #___ \$50.00 | \$     | Scholarship                  | \$     |
| Evangelism                        | \$     | Miracle Hill                 | \$     |
| Local Church Laymen Dept. \$25.00 | \$     | Prayer Breakfast #___\$25.00 | \$     |
| Offerings per Worship \$20.00     | \$     | Presidents Love Offering     | \$     |
| Union Meeting \$50.00             | \$     | One Day Registration \$25.00 | \$     |
| Miracle Village                   | \$     |                              |        |

TOTAL: \$ \_\_\_\_\_      DATE \_\_\_\_\_      Received by \_\_\_\_\_

WHITE - Office      YELLOW - Financial Secretary      BLUE - Individual Receipt