

Apostolic Bible Students Association of Indiana, Inc.
 4th Episcopal District - Pentecostal Assemblies of the World, Inc.
 Bishop Charles A. Sims, Diocesan — Suffragan Bishop Donsero Reynolds, Council Chairman

Date _____ Annual Session _____ Summer Session _____ Fall Session X

YOUTH PRE - REGISTRATION INFORMATION FORM – PLEASE PRINT

Church Name _____ Your Pastor _____

Street Address _____ City _____ State _____ Zip _____

Church E-mail/Website Address _____

Council & Auxiliary Fees

(Circle No. of desired Auxiliary)	# of Children Ages 4-12 Years \$0.50	# of Children Ages 13-17 Years 1.50	Child's Name & Age
1. A.B.S.A. Council			1.
2. Men's Ministry			2.
3. Single's Ministry			3.
4. Missionary & Christian Women			4.
5. Ministers' Wives & Ministers' Widows			5.
6. Christian Education Department			6.
7. Indiana State Pentecostal Young People			7.
8. Indiana State Ushers			8.
9. Indiana Health Professionals			9.
10. Deaf Ministry			10.
GRAND TOTAL	\$	\$	

Office Use Only **** Payment Information

Received By _____ Date Received _____ Cash _____ Check No. _____ Money Order _____

Pre - Registration / Deadline - Must be received by October 13, 2017

Please mail to: ABSA Secretary, C/O: Christ Temple Apostolic Faith Assembly / 430 W. Fall Creek Pkwy. N. Dr. - Indianapolis, IN 46208