

GENERAL CHURCH INFORMATION

Pastor: _____ Home Phone () ____ - _____
Mailing Address _____ E-Mail _____
Church Clerk: _____
\$35 Website Link Activated On www.hpassociation.com _____ (Yes) _____ (No)

INSTRUCTIONS

The \$800-\$1200 Annual Operational Assessment does not include Woman's Auxiliary Special Projects monies or church and individual representation fees for sessions.

General Church information: Please provide updated address information for the pastor and Church Clerk – (please use the address where the church receives mail and E-mail.) Membership numbers are optional. However, this information will help the Association continue to pray and support your church for future growth. Please check yes or no appropriately if you have /have not activated your church's web-page on our website at www.hpassociation.com for the one-time fee of \$35.

Amount of Association Operational Assessment Brought to this Session. The annual assessment (\$800.00-\$1200.00) will support the financial operations of the parent body and its auxiliaries. List only the fees you are submitting to this session. List the names of up to three delegates for the General Session of the Association and/or for each Auxiliary; (the Pastor is always one delegate to the General Session). Distinctive name tags will be provided delegates and only those persons will be eligible to vote in voting sessions. You may designate the same delegates for more than one or all Auxiliaries and the General Session of the Association, though this is not recommended if it can be avoided. Write the total of all fees in this section on the line for Total Association Fee Assessment Submitted this Session.

Contributions Submitted this Session For Local, State and National Objectives: As in previous years, each church is asked to support our Youth Trac with a \$200 contribution, which is in addition to the registration fee for each child. If contributing less than \$200, please contribute as much as you can. Multiply the number of youth you are sending by the appropriate registration fee and enter this amount on the second line. Contributions to be forwarded to the listed state and national objectives through the Association must be identified in this section. All amounts will be totaled from each church and forwarded by Association check.

Total Contributions Submitted at this Session: This is the total amount of all contributions for local, state and national objectives. This amount does not include your Annual Association Fee Assessment submitted this session, but only the contributions.

Total Fees and Contributions (2017-2018): This is the total amount of your Annual Association Fee Assessment and all other contributions submitted to this session. Your Association receipt will show this amount.

Total Fees and Contributions Sent Prior to this Session: If you would like recognition for your support sent to the Association and/or its auxiliaries, the State Convention and/or its auxiliaries, and other national organizations you gave prior to this session please attach copies of your checks or receipts to this form.

You can mail your check and completed form to: HPEMBA P.O. Box 17336 Winston-Salem, NC 27116

"1 Corinthians 12:12 – "We must do His business together"

Rev. Alex Turner

Updated 1/30/2018

**HIGH POINT EDUCATIONAL & MISSIONARY BAPTIST ASSOCIATION, INC.
CHURCH REPORT FORM**

Date: _____

The _____ Missionary Baptist Church of _____, N.C.
_____ (zip), Church Phone() _____ - _____, E-mail _____ sends
greetings and the following report:

HPEMBA OPERATIONAL ASSESSMENT FUNDS FOR 2017-2018 (\$800-\$1200)

NOTE: These funds are used to meet operational budget expenses including our national and international objectives as allocated in the budget for the parent body.

Amount of Annual Operational Assessment Funds Already Submitted this year \$ _____

Amount of Association Operational Assessment Brought to this Session \$ _____

Total of all Association Assessment Funds submitted year-to-date \$ _____

This amount determines the number of your voting delegates per Session below.
(1 Delegate per session – any amount; 2 Delegates per session - \$800;
3 Delegates per session - \$1200)

CONGRESS OF CHRISTIAN EDUCATION SESSION

Delegates:

1. _____
2. _____
3. _____

HELPS MINISTRY SESSION

Delegates:

1. _____
2. _____
3. _____

WOMAN'S AUXILIARY, YOUNG ADULT AND YOUTH SESSION

Delegates:

1. _____

2. _____

3. _____

GENERAL ASSEMBLY SESSION

Delegates:

1. _____

2. _____

3. _____

ORDAINED MINISTERS ____ X \$30: LICENSED MINISTERS ____ X \$30 = TOTAL \$_____

Please list the names of Ordained and Licensed Ministers:

CONTRIBUTIONS FOR LOCAL, STATE AND NATIONAL OBJECTIVES (LSNO)

(These funds are in addition to your support of the Association's \$1200 operational assessment)

Youth and Children's Trac Contribution (Recommended at \$200) \$_____

Youth & Children's Trac Registration: **\$15.00** x ____ (# of Youth) Total \$_____

HPEMBA Scholarship Fund \$_____

HPEMBA Church Aid and Support \$_____

HPEMBA Retired Ministers Fund \$_____

Shaw University \$____.____ Divinity School \$____.____ Total \$_____

Central Children's Home \$_____

General Baptist State Convention (GBSC) \$_____

Woman's Baptist Home & Foreign Missions Convention (GBSC) \$_____

Foreign Missions (Lott Carey Convention) \$_____

Total LSNO Contributions Submitted at this Session \$_____

TOTAL ASSESSMENT, MINISTER FEES AND LSNO CONTRIBUTIONS SENT TO THIS SESSION \$_____