



## Congress of Christian Education Church Registration Form

Name of Church \_\_\_\_\_

Church Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Church Telephone Number \_\_\_\_\_ Fax Number \_\_\_\_\_

Pastor \_\_\_\_\_

Number of Delegates Attending Congress \_\_\_\_\_ @ \$100.00 (Pre-Registration) \$ \_\_\_\_\_  
or \$125.00 after June 19, 2023

Number of One Day Registrations \_\_\_\_\_ @ \$35.00 \$ \_\_\_\_\_

Parent Body Registration \$ \_\_\_\_\_

Other (Mission, Convention Center, etc.) \$ \_\_\_\_\_

**TOTAL (Checks payable to New Era Convention) \$ \_\_\_\_\_**

**Each delegate, including adults must complete an "Individual Delegate Registration Form". All chaperones must complete a "Volunteer Screening Form". If a Volunteer Screening Form was completed in the previous years, there will be no need to submit a new one. Delegates under the age of 18 must complete a "Code of Conduct Contract". These forms should be completed and attached to this Church Registration Form.**

Number of Youth Males \_\_\_\_\_

Number of Youth Females \_\_\_\_\_

Number of Adult Males \_\_\_\_\_

Number of Adult Females \_\_\_\_\_

Names of Male Chaperones

Names of Female Chaperones

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

***Please note: for every three male/female youth attending the Congress, there should be at least one male/female chaperone).***

Form Submitted by \_\_\_\_\_

Please return form and check to:

New Era Missionary Baptist Convention of Georgia  
Attention: Congress of Christian Education  
P. O. Box 54056  
Atlanta, GA 30308

*(copy as needed)*