

**Eastern Union Missionary Baptist Association**



186 N. 17<sup>th</sup> Street, Columbus, OH, 43203  
 PO Box 361255, Columbus, OH, 43236

**Dr. Howard T. Washington, Moderator**

**CHURCH REGISTRATION AND MESSENGER FORM**

Church Name			
Mailing Address			
City, State and Zip Code			
Church Phone Number		Church Email Address	
Church Web Address		Preferred Method of Communication	
		Email	Standard Mail
Pastor's Name			
Pastor's Telephone Number		Pastor's Email Address	

The registration fee scale below is determined by church membership and includes paid registrations for three (3) adult Congress of Christian Education courses.

**PARENT BODY CHURCH REPRESENTATION REGISTRATION SCALE**

<b>1 thru 50</b>	<b>\$175.00</b>	<b>151 thru 300</b>	<b>\$375.00</b>	<b>501 thru 750</b>	<b>\$800.00</b>
<b>51 thru 150</b>	<b>\$275.00</b>	<b>301 thru 500</b>	<b>\$550.00</b>	<b>751 thru 1,000</b>	<b>\$1,050.00</b>

List the names of the three adult members whose Congress of Christian Education course is paid with this registration.

- 1) \_\_\_\_\_
- 2) \_\_\_\_\_
- 3) \_\_\_\_\_

EUMBA Auxiliary donations may be made during the Annual Session and are in addition to your church registration fee. List EUMBA Auxiliary donations below.

Parent Body: \$ \_\_\_\_\_ Congress: \$ \_\_\_\_\_  
 Laymen: \$ \_\_\_\_\_ Women: \$ \_\_\_\_\_  
 Youth: \$ \_\_\_\_\_ Other: \_\_\_\_\_ \$ \_\_\_\_\_

**Method of Payment:** \_\_\_\_\_ **Total amount of payment \$** \_\_\_\_\_

QR Code      Givelify (EUMBA)      Cash App (\$EUMBA19)      Check / Money Order      Cash

**EUMBA CHURCH DELEGATES LIST**

The following delegates have been duly elected to officially represent our church at this Annual Session. Please list three delegates and 1 additional delegate for every 50 members over 100. Include the Pastor as one of the delegates.

_____	_____
_____	_____
_____	_____
_____	_____

Mail completed form to 186 N. 17<sup>th</sup> Street, Columbus, OH 43203 **or** PO Box. 361255 Columbus, OH, 43236 **or** email form to [Lbynum@aol.com](mailto:Lbynum@aol.com).

**For EUMBA finance use only**

Date electronic payment verified \_\_\_\_\_

Check # \_\_\_\_\_

Receipt # \_\_\_\_\_

Initials \_\_\_\_\_