

**OLD WEST FLORIDA PRIMITIVE BAPTIST CHURCH SCHOOL CONVENTION  
ELDER CONNELL LEONARD, SR., PRESIDENT ELDER JOE MALONE, VICE-PRESIDENT**

CHURCH NAME: \_\_\_\_\_ PASTOR: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ TOTAL MEMBERS: \_\_\_\_\_

**CHURCH REGISTRATION FORM  
SECTION A**

- |   |       |                                       |      |
|---|-------|---------------------------------------|------|
| <input type="checkbox"/> A 300 Members & Up   | \$300 | <input type="checkbox"/> Pastor _____ | \$50 |
| <input type="checkbox"/> B 200 – 299 Members  | \$250 | <input type="checkbox"/> Elder _____  | \$50 |
| <input type="checkbox"/> C 150 – 199 Members  | \$200 | <input type="checkbox"/> Elder _____  | \$50 |
| <input type="checkbox"/> D 100 – 149 Members  | \$150 | <input type="checkbox"/> Elder _____  | \$50 |
| <input type="checkbox"/> E 99 or Less Members | \$100 | <input type="checkbox"/> Elder _____  | \$50 |
- 
- |                                |                |
|--------------------------------|----------------|
| <b>Licensed Ministers (LM)</b> | <b>\$25.00</b> |
| <b>Deacons (Dea.)</b>          | <b>\$15.00</b> |
| <b>Delegates (Del.)</b>        | <b>\$10.00</b> |
- 
- |   |             |      |
|---|-------------|------|
| <input type="checkbox"/> Corresponding Delegate | Name: _____ | \$25 |
|---|-------------|------|

- |                             |                               |                                |       |         |
|-----------------------------|-------------------------------|--------------------------------|-------|---------|
| <input type="checkbox"/> LM | <input type="checkbox"/> Dea. | <input type="checkbox"/> Del.: | _____ | \$_____ |
| <input type="checkbox"/> LM | <input type="checkbox"/> Dea. | <input type="checkbox"/> Del.: | _____ | \$_____ |
| <input type="checkbox"/> LM | <input type="checkbox"/> Dea. | <input type="checkbox"/> Del.: | _____ | \$_____ |
| <input type="checkbox"/> LM | <input type="checkbox"/> Dea. | <input type="checkbox"/> Del.: | _____ | \$_____ |
| <input type="checkbox"/> LM | <input type="checkbox"/> Dea. | <input type="checkbox"/> Del.: | _____ | \$_____ |
| <input type="checkbox"/> LM | <input type="checkbox"/> Dea. | <input type="checkbox"/> Del.: | _____ | \$_____ |
| <input type="checkbox"/> LM | <input type="checkbox"/> Dea. | <input type="checkbox"/> Del.: | _____ | \$_____ |
| <input type="checkbox"/> LM | <input type="checkbox"/> Dea. | <input type="checkbox"/> Del.: | _____ | \$_____ |
| <input type="checkbox"/> LM | <input type="checkbox"/> Dea. | <input type="checkbox"/> Del.: | _____ | \$_____ |
| <input type="checkbox"/> LM | <input type="checkbox"/> Dea. | <input type="checkbox"/> Del.: | _____ | \$_____ |
| <input type="checkbox"/> LM | <input type="checkbox"/> Dea. | <input type="checkbox"/> Del.: | _____ | \$_____ |

**TOTAL SECTION A:** \_\_\_\_\_

**SECTION B**

- |   |                                 |
|---|---------------------------------|
| Church School <input type="checkbox"/> \$25 | Pre-Opening Program \$_____     |
| Meal Ticket (\$25 x _____) \$_____          | Banquet Tickets: Adults \$_____ |
| T-SHIRTS \$_____ (Copy of Order Required)   | Youth \$_____                   |
| Youth State Convention: \$_____             |                                 |

**TOTAL SECTION B:** \_\_\_\_\_

**GRAND TOTAL:** \_\_\_\_\_

Date: _____	Received By: _____	Total Received _____
White Copy~~Convention	Yellow Copy~~Financial Secretary	Pink Copy~~Church