

NOTE: If a Delegate registers for more than one class, each additional class is an extra \$5.00.

FOR OFFICE USE ONLY
Registration \#: $\qquad$ Amount Paid: \$ $\qquad$ Method of Payment Cash $\qquad$ Credit Card Received by: $\qquad$ Date $\qquad$

## ANNU AL REGISTRATION, ENROLLMENT LETTER \& CLASSIFICATION

ChurchName: $\qquad$
Full Mailing Address: $\qquad$
Telephone No.: $\qquad$ E-mail/Web Address:

Number of Delegates: $\qquad$ Total No. Enrolled in Your Sunday School $\qquad$ and NBC (B.T.U.): $\qquad$ Pastor's Name: $\qquad$ Telephone No.: $\qquad$
$\qquad$
Full Mailing Address: $\qquad$
E-mail Address: $\qquad$
Superintendent's Name: $\qquad$ Telephone No.: $\qquad$
$\qquad$
Full Mailing Address: $\qquad$
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E-mail Address: $\qquad$
Signature of Person Completing Registration:

| Name(s) of Delegate(s) | Delegate(s) Email address | Morning <br> Course No. | Afternoon <br> Course No. | Children's <br> Course No. |
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Jefferson County District Congress of Christian Education
Classification (continued)

| Name(s) of Delegate(s) | Delegate(s) Email address | Morning Course No. | Afternoon Course No. | Children's Course No. |
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