# JEFFERSON COUNTY DISTRICT
# CONGRESS OF CHRISTIAN EDUCATION

***Check the applicable box(es)***

- ☐ **JCDMBA Church Registration $100.00**
- ☐ **Delegates $20.00_____**
- ☐ **Congress Staff $25.00_____**
- ☐ **#Delegates _____**
- ☐ **Instructors $20.00 _____**

***NOTE:*** **If a Delegate registers for more than one class, each additional class is an extra $20.00. Non district $25.00**

**FOR OFFICE USE ONLY**

Registration #: _____

Amount Paid: $_____

*Method of Payment*

Cash _____ Credit Card _____ Check #: ___

Received by: _____Date _____

## ANNUAL REGISTRATION, ENROLLMENT LETTER & CLASSIFICATION

ChurchName:_____ _____

Full Mailing Address: _____

Telephone No.: _____ E-mail/Web Address: _____

Number of Delegates: _____ Total No. Enrolled in Your Sunday School_____ and NBC (B.T.U.):_____

Pastor's Name: _____ Telephone No.: _____

Full Mailing Address: _____

E-mail Address: _____

Superintendent's Name: _____ Telephone No.:_____

Full Mailing Address: _____

E-mail Address: _____

Signature of Person Completing Registration: _____

| *Name(s) of Delegate(s)* | *Delegate(s) Email address* | *Morning Course No.* | *Afternoon Course No.* | Children's Course No. |
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White Copy ***(Registration)*** Yellow Copy ***(Classification)*** Pink Copy ***(Registrant)***

# 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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*White Copy (Registration)* *Yellow Copy (Classification)* *Pink Copy (Registrant)*