

2025 American Baptist Association Church Letter Form

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Please type or print clearly when completing this form						
CHURCH NAME						

Church Physical A	Church Mailing Address				
Street		treet or PO Box			
City, State, Zip	City, State, Zip				
PHONE	CHURCH EMAIL		CHURCH	WEBSITE	
	ADDRESS (Street, City, State)			ZIP	
PASTOR NAME PASTOR'S EMAIL ADDRESS				PHONE	
ASSOCIATE PASTOR NAME	ADDRESS (Street, City, State, Zip)		PHONE		
CLERK NAME	ADDRESS (Street, City, State, Zip)			PHONE	
USIC DIRECTOR NAME ADDRESS (Street, City, State, Zip)				PHONE	
YOUTH PASTOR/DIRECTOR NAME		PHONE			
ANY OTHER NAME NEEDED	ADDRESS (Street, City, State, Zip)			PHONE	
<u>PLEASE CHECK ONE:</u> Our church will be represented by:	LETTER OR MES	SENGER(S)	Number	of Messengers	
During the past church year, we gave			to Missions.		
The cost of operation for the associating per year. The estimated cost of printing for the first book and \$10 for each addition	and mailing yearbooks is \$15	We are requesting # Yearbooks. Each Church will receive by FedEx one complimentary copy of the Directory with the order of Yearbooks. Provide a physical address below for delivery. PO Boxes are not accepted.			
We are enclosing the following:					
Yearbooks & Expense of Meeting	\$	NAME			
Missionary Committee Travel Exp	ense Fund \$				
	ll enclosed \$	STREET			
Please make you check payable to <i>Ameri</i> include this form with check.	can Baptist Association and	CITY, STATE, ZIP			

To submit name(s) to be included in the ANNUAL ABA MEMORIAL REPORT for Preachers, Pastors and Missionaries, go to www.abaptist.org/hotelsandinformation, click on the link and follow the directions.