



2024 American Baptist Association Church Letter Form

Please type or print clearly when completing this form



CHURCH NAME

Church Physical Address		Church Mailing Address	
Street		Street or PO Box	
City, State, Zip		City, State, Zip	
PHONE	CHURCH EMAIL	CHURCH WEBSITE	
PASTOR NAME	ADDRESS (Street, City, State)	ZIP	
	PASTOR'S EMAIL ADDRESS	PHONE	
ASSOCIATE PASTOR NAME	ADDRESS (Street, City, State, Zip)	PHONE	
CLERK NAME	ADDRESS (Street, City, State, Zip)	PHONE	
MUSIC DIRECTOR NAME	ADDRESS (Street, City, State, Zip)	PHONE	
YOUTH PASTOR/DIRECTOR NAME	ADDRESS (Street, City, State, Zip)	PHONE	
ANY OTHER NAME NEEDED	ADDRESS (Street, City, State, Zip)	PHONE	

PLEASE CHECK ONE:

Our church will be represented by: LETTER _____ OR MESSENGER(S) _____ Number of Messengers _____

During the past church year, we gave a total of \$ _____ to Missions.

The cost of operation for the association is approximately \$130,000 per year. The estimated cost of printing and mailing yearbooks is \$15 for the first book and \$10 for each additional book.

We are enclosing the following:

Yearbooks & Expense of Meeting \$ _____

Missionary Committee Travel Expense Fund \$ _____

Total enclosed \$ _____

Please make you check payable to **American Baptist Association** and include this form with check.

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.

NAME
STREET
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.

*Please mail form to: Chairman of Enrollment Committee, PO Box 1050, Texarkana, TX 75504-1050
If mailing, please return prior to ABA Messenger Meeting for accurate accounting.*