



**PROGRESSIVE NATIONAL BAPTIST CONVENTION, INC.**  
**2024 NATIONAL BAPTIST JOINT BOARD SESSION**  
**Memphis, TN January 22-24, 2024**  
**Church/Individual Registration Form**

Check One: ☐ Church ☐ State Convention ☐ State Fellowship ☐ Association ☐ Individual

Please type or print clearly.

CHURCH NAME \_\_\_\_\_

PASTOR'S NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ EMAIL \_\_\_\_\_

CHURCH PHONE \_\_\_\_\_ CHURCH FAX \_\_\_\_\_

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**\$200.00 Registration fee per Church, State Convention, State Fellowship or Association**

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**INDIVIDUAL AND VISITOR REGISTRATION [please include home address]**  
**Individual & Visitor Registration Fee: \$75.00 (Visitors are persons attending non PNBC churches)**

(Mr., Mrs., Ms., Rev., Dr.)

TITLE \_\_\_\_\_ FIRST NAME \_\_\_\_\_ MI \_\_\_\_\_ LAST NAME \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_ EMAIL \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

DAYTIME PHONE \_\_\_\_\_ HOME PHONE \_\_\_\_\_ CELL PHONE \_\_\_\_\_

**Women's Scholarship Luncheon \$50.00 - \_\_\_\_\_ x \$50.00 = \$ \_\_\_\_\_**

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Total Amount Remitted: \$ \_\_\_\_\_

Method of Payment: \_\_\_\_\_ Check \_\_\_\_\_ Money Order \_\_\_\_\_ Credit Card [credit card payments can be faxed to 202-398-4998]

Credit Card # \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Please Print Name as it Appears on Card: \_\_\_\_\_

Signature of Cardholder: \_\_\_\_\_

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**RETURN COMPLETED FORMS BY JANUARY 04, 2024 TO:**

**Progressive National Baptist Convention, Inc.**

**601 – 50<sup>th</sup> Street, NE Washington, DC 20019**

**202-396-0558 [office] 202-398-4998 [fax]**

**Email: [membership@pnbc.org](mailto:membership@pnbc.org)**