



# HUSBANDS' COMMITTEE OFFICIAL REGISTRATION FORM

**International Association of Ministers' Wives and Ministers' Widows, Incorporated**  
 Dr. Margaret Brown Payton, International President

**1 REGISTRATION INFORMATION (Please print legibly or type)**

Date \_\_\_\_\_

Please submit by April 30

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Email \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Church \_\_\_\_\_ Denomination (Be specific) \_\_\_\_\_

Pastor's Name \_\_\_\_\_ Pastor's Wife Name \_\_\_\_\_

(  ) Check here if this is the first IAMWMW Convention you have attended. Convention City \_\_\_\_\_

**2**

**FEES**

- |   |    |             |
|---|----|-------------|
| 1. Registration .....                           | \$ | 75.00 _____ |
| 2. Herald Subscription .....                    | \$ | 10.00 _____ |
| 3. Herald Honor Roll .....                      | \$ | 10.00 _____ |
| 4. Calendar-Birthday      Month _____ Day _____ | \$ | 5.00 _____  |
| Anniversary              Month _____ Day _____  | \$ | 5.00 _____  |
| 5. Individual Scholarship Contribution:         |    |             |
| • E.C. Bouey .....                              | \$ | _____       |
| • Ada Palmer .....                              | \$ | _____       |
| • Gladden Johnson .....                         | \$ | _____       |
| • Rendella L. Gayton .....                      | \$ | _____       |

**Ticketed Events**

**LEGACY LUNCHEON (Please order w/spouse)**

**PRESIDENT'S BREAKFAST (Please order w/spouse)**

**AWARDS GALA BANQUET (Please order w/spouse)**

**TOTAL \$ \_\_\_\_\_**

**3**

**FORMS OF PAYMENT ACCEPTED (MAIL-IN OR ON-SITE)**

**IAMWMW OFFICE USE ONLY**

**ORGANIZATIONAL CHECK, CASHIER'S CHECK, MONEY ORDER  
 CASH (On-Site Only)**

**PAYABLE TO: IAMWMW**

SEND TO: Dr. Loretta H. Dennis  
 3925 River Bluffs Place  
 Richmond, VA 23223

**NO PERSONAL CHECKS**

Date Received \_\_\_\_\_ Total \$ \_\_\_\_\_

**Method of Payment:** Cash \_\_\_\_\_ Credit Card \_\_\_\_\_

Money Order # \_\_\_\_\_ Organization Check # \_\_\_\_\_

Cashier Check # \_\_\_\_\_

Receipt # \_\_\_\_\_