



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. 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 # _____