

# FLORIDA STATE PRIMITIVE BAPTIST CONVENTION, INC.

## MORTUARY REGISTRATION

Elder Willie J. Williams, D. D., General President (813) 394-8864

Emails: [aware904@gmail.com](mailto:aware904@gmail.com) [Fspbcinc@hotmail.com](mailto:Fspbcinc@hotmail.com)

Elder Al Ware, Financial Secretary (727) 415-4866

P. O. Box 16823 – St. Petersburg, FL 33733

**In order to participate in the Mortuary fund, you must be an Ordained Elder, Deacon or hold an office in the Women Congress. You must register with the delegate amount each year and contribute to the Mortuary fund.**

\_\_\_\_ NEW MEMBER (**\$25.00**) - (One Time Joining Fee)

### ANNUAL ENROLLMENT

\_\_\_\_ EXISTING MEMBERS- Elder (**\$20.00**) Deacons and Others (**\$10.00**)

(Please Check One) \_\_\_\_ Elder \_\_\_\_ Deacon \_\_\_\_ Other

Name \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Address \_\_\_\_\_

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

Email Address \_\_\_\_\_ Married \_\_\_\_ Single \_\_\_\_

**Total Contribution \$** \_\_\_\_\_ Date \_\_\_\_\_ Received by \_\_\_\_\_

### (BENEFICIARY) Please update annually

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

Address \_\_\_\_\_

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

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

### Note to Beneficiary-Please contact the above listed for benefits payout

Benefits approved: \_\_\_\_\_ Chairman Date \_\_\_\_\_

Benefits approved: \_\_\_\_\_ President Date \_\_\_\_\_

### FOR CONVENTION USE ONLY

**Total Registration** \_\_\_\_\_ **Date** \_\_\_\_\_ **Received by** \_\_\_\_\_

**NOTE: Form must be signed by the Chairman and the General President, or his designee.**

**White – Office**

**Yellow – Individual**

**Blue – Financial Secretary**

**Pink - Chairman**