



# Southwest Missionary Baptist Association, Inc.

Pastor Bonji F. Arvie, General President

Pastor Berthel Lewis, General Secretary

2124 5th Street, Lake Charles, Louisiana 70601

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Website: [www.southwestmba.org](http://www.southwestmba.org) • Facebook: SWMBA

Date: \_\_\_\_\_

## Registration Form

Annual Session  Continued Session  Mid-Winter Session  Leader "Shift" Conference

Event Date: Sunday, January 25, 2026

Location: St. Paul Baptist Church – Rev. Albert R. Johnson, Pastor  
1300 5th Street, Mamou, Louisiana 70554

### Church or Individual Registration Information:

Church or Individual Name: \_\_\_\_\_

Pastors Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Phone No.: (      ) \_\_\_\_\_

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

### Financial Obligations: (CAP Supporters)

If you have already given your monthly contributions,  
you are exempt from this session.

Mark exempt if you have already  
given this month.

Church	\$50.00	<input type="checkbox"/> Exempt	\$
Auxiliary Name	\$25.00	<input type="checkbox"/> Exempt	\$
Individual	\$15.00	<input type="checkbox"/> Exempt	\$

### Financial Obligations: (Non-CAP Supporters)

#### How Many? Total

Church-Parent Body	\$150.00		\$
Congress	\$100.00		\$
Education/Scholarship	\$225.00		\$
Home & Foreign Mission	\$125.00		\$
Evangelical Board	\$ 50.00		\$

#### Auxiliaries (each)

Youth & Children  Millennials/Young Adults  Usher's  
 Health & Wellness  Women's Mission Union  Music  
 Men's Auxiliary/Brotherhood  Minister Wives

#### Pastor

Pastor	\$ 30.00		\$
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#### Officer(s) Please List...

Officer(s) Please List...	\$ 25.00	x \$25.00	\$
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Name \_\_\_\_\_ Name \_\_\_\_\_

Name \_\_\_\_\_ Name \_\_\_\_\_

#### Adult(s) Please List...

Adult(s) Please List...	\$ 20.00	x \$20.00	\$
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Name \_\_\_\_\_ Name \_\_\_\_\_

Name \_\_\_\_\_ Name \_\_\_\_\_

#### Youth(s)

Youth(s)	\$ 10.00	x \$10.00	\$
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Total Amount Submitted \$

*Thank You and God Bless You!*

### For Office Use Only:

Date Received: \_\_\_\_\_ Amount Received: \$ \_\_\_\_\_

Received by: \_\_\_\_\_

Cash

Check-Check No.: \_\_\_\_\_

Cash App

Givelify