

LEBANON VIRGINIA BAPTIST ASSOCIATION and ALLIED BODIES

CHURCH LETTER FORM



Delegate Information Request Form

CHURCH NAME: _____

PASTOR'S NAME: _____

DELEGATES: (For voting purposes, a maximum of only 5 people are allowed for each church.)

1. _____

2. _____

3. _____

4. _____

5. _____

PASTOR'S SIGNATURE

DATE