



PROGRESSIVE NATIONAL BAPTIST CONVENTION, INC.

Women's Department Individual Commitment Form

Ms. Alberta Bean, Vice President at-Large



Please type or print clearly.

(Mrs., Ms., Minister, Rev., Dr.)

TITLE \_\_\_\_\_ FIRST NAME \_\_\_\_\_ MI \_\_\_\_\_ LAST NAME \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_ BIRTHDAY: MONTH \_\_\_\_\_ DAY \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

HOME PHONE \_\_\_\_\_ CELL PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

CHURCH/ADDRESS/ZIP \_\_\_\_\_

PASTOR/PHONE \_\_\_\_\_

**PART A ALL INCLUSIVE OR DEPARTMENTAL COMMITMENT WILL PUT YOUR NAME ON THE MAILING LIST**

**\$100 All Inclusive Commitment** (\$25 Personal Commitment; \$35 Special Project; \$25 Unit; \$5 Local Outreach; \$10 M.L. Wormley Scholarship)

Name of Unit \_\_\_\_\_ (see code list on back of page)

**PART B ITEMIZED CONTRIBUTIONS TO WOMEN'S DEPARTMENT (if unable to pay \$100 all inclusive commitment)**

(T5) Personal Commitment \$25.00 \$ \_\_\_\_\_ ( ) Unit Only \$25.00 or more \$ \_\_\_\_\_ (code on back)

(U1) Local Outreach \$5.00 or more \$ \_\_\_\_\_ (UE) ML Wormley Scholarship \$10.00 or more \$ \_\_\_\_\_

(U7) Special Project \$35.00 (indicate your region) \$ \_\_\_\_\_ ( \_\_\_ Eastern \_\_\_ Midwest \_\_\_ Southern \_\_\_ Southwest \_\_\_ International)

**PART C GROUP REGISTRATION**

(UG) Local Missionary/Women's Ministry \$50.00 \$ \_\_\_\_\_ Name \_\_\_\_\_

(UK) District/Associations \$100.00 \$ \_\_\_\_\_ Name \_\_\_\_\_

(UL) State Convention/Fellowship \$200.00 \$ \_\_\_\_\_ Name \_\_\_\_\_

(UH) Progressive Day of Prayer (June) \$ \_\_\_\_\_ Name \_\_\_\_\_

(UB) Women's World Day of Prayer (Nov) \$ \_\_\_\_\_ Name \_\_\_\_\_

( ) MISCELLANEOUS \$ \_\_\_\_\_ Name \_\_\_\_\_ TOTAL \$ \_\_\_\_\_

**PART D EVENTS**

(UM) Women's Luncheon \$50.00 # of Tickets \_\_\_\_\_ TOTAL \$ \_\_\_\_\_

[Payment must accompany form] Method of Payment: \_\_\_ Check \_\_\_ Money Order

\_\_\_ Credit Card \_\_\_ AMEX \_\_\_ VISA \_\_\_ Mastercard \_\_\_ Discover

Credit Card# \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Print Name as it appears on card: \_\_\_\_\_

Signature of Cardholder: \_\_\_\_\_

TOTAL REMITTED: \$ \_\_\_\_\_

Credit card payments may be phoned in to PNBC [202-396-0558] or faxed to PNBC [202-398-4998]