

Pre-Registration

2024 NATIONAL ASSOCIATION OF FREE WILL BAPTISTS

NAFWB | V3 | TAMPA, FLORIDA | JULY 21-24

One Form Per Person | Register Online: www.nafwb.org | Name Badges Required for All Convention Events

First Name _____ Last Name _____
Home Address _____ City _____ State _____ Zip _____
Country (if outside USA) _____ Email _____
Home Phone _____ Cell Phone _____
Church You Attend _____ Church City _____ State _____

National Association (All voting delegates must be members in good standing of a FWB church.)

Voting Delegates

- ☐ National Board/Commission Member
- ☐ Ordained Minister
- ☐ Ordained Deacon
- ☐ State Delegate (Authorization Required)
- ☐ Local Church Delegate (Delegate Card Required)

Non-Voting

- ☐ Attendee (All Ages, Including Infants and Toddlers)

Tickets

WNAC Laughter and Latté.....Qty_____ x \$12 = _____

Monday, July 22, 8:30 p.m. (\$15 onsite; limited availability onsite)

Welch Alumni & Friends Luncheon.....Qty_____ x \$45 = _____

Wednesday, July 24, noon (\$55 onsite; no tickets will be sold between pre-registration closing and convention; limited availability onsite)

National Association Info: 877-767-7659 | www.nafwb.org

Vertical Three Conference

Preschool

- ☐ Ages 3-5, Attending Preschool Worship - \$25 (\$35 onsite)
- ☐ Ages 0-5, Not Attending Preschool Worship - NO FEE

Students: \$30

Any student or competitor* attending any CTS competition or event MUST pay \$30 V3 conference fee (\$40 onsite).

- ☐ Grades K-3
- ☐ Grades 4-6
- ☐ Grades 7-12

*Competitors must pay V3 conference fee in addition to CTS competition fees already paid.

College Age | Adults: \$25

Adults attending any competition or event MUST pay \$25.

- ☐ Adult Attendee

V3 Event: Blessing OfforQty_____ x \$15 = _____

Tuesday, July 23, 9:00 pm (\$20 onsite/at the door)

V3 Information: 800-877-7030 | www.verticalthree.com

Register April 1 - June 21 | No Refunds After June 21

Payment Options:

- + Check (Payable to FWB Convention)
- + Visa, Discover, or MasterCard only (both debit and credit cards accepted)

Card # _____

Card Holder _____ Exp ____/____

Signature _____

NAFWB Questions: 877-767-7659 | convention@nafwb.org

Return to:

Convention Registration

PO Box 5002
Antioch, TN 37011



Office Use Only: Date _____ CK# _____ Amt \$ _____ From _____