



**South Carolina Baptist Congress of Christian Education
Mid-Winter Workshop
April 28, 2018
Youth Summit & Youth Workers Classification Form**

Mail completed form to:
Attn: SCBCCE
Rev. Cathy C. Charles
POB 15313
Florence, SC 29506

Church: _____ Address: _____

City: _____ State: SC Zip: _____ Phone: _____

Contact Person: _____ Contact Person Email: _____ Phone: _____

Contact Person Address: _____ City: _____, SC. Zip _____

Fees: Mid-Winter Workshops:
Church Registration- \$100.00
Association/District Congress- \$150.00
Delegate-\$20.00 **(Used with a Church/Association Registration)**
Individual- \$25.00

	Delegate's Name	Fee	Course	Email Address (Contact Person Only)	Church Level
1.		Included			\$
2.		20.00			
3.		20.00			
4.		20.00			
5.		20.00			
6.		20.00			
7.		20.00			
8.		20.00			
9.		20.00			
10.		20.00			
11.		20.00			
12.		20.00			
13.		20.00			
14.		20.00			
15.		20.00			
16.		20.00			
17.		20.00			Total-

The first delegate is included in the Church/Association or District Fee, each delegate thereafter is \$20.00 per person