GEORGIA ASSOCIATION OF MINISTERS' WIVES AND MINISTERS' WIDOWS INTERDENOMINATIONAL

PERSONAL REGISTRATION CHAPTER REPORT

Name of Chapter _____Chapter Category _____

President's Name _____ Phone # _____

Address _____ City _____ State _____ Zip _____

Please Submit by March 10th

NAME	HONOR ROLL	REGISTRATION	EXECUTIVE BOARD	LIFE MEMBERSHIP	TOTAL

MAKE CHECK PAYABLE TO GAMWMW.

SEND ALL COPIES OF THIS FORM AND PAYMENT TO:

MRS. ADA LONG
P. O. BOX 582
NEWNAN, GA 30264

Honor Roll - $10.00
Not Attending - $25.00
Attending - $50.00
Executive Board - $5.00
Life Membership - $75.00

COPIES: WHITE – FINANCIAL SECRETARY
CANARY – REGISTRAR – PINK – STATE PRESIDENT
GOLDENROD – LOCAL PRESIDENT

GAMWMW

Date Received _____

Total _____ Check #_____

Receipt # _____