



**B.M.E. STATE CONGRESS OF CHRISTIAN EDUCATION**

AUXILIARY TO THE B.M.E. STATE CONVENTION OF TEXAS

DR. S. C. NASH, CONVENTION PRESIDENT

DR. STANLEY T. HILLARD, CONGRESS PRESIDENT

REV. DWIGHT BENOIT, GENERAL SECRETARY

JAMESSE KESEE, SECRETARY

**Greetings**

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**Fourth Annual Presidential Scholarship Banquet**

**Focus – Youth Scholarships**

**Date:** Wednesday, July 24, 2019

**Place:** Hopkins County Civic Center

1200 Houston Street – Sulphur Springs, TX 75482

**Time:** 7:00 p.m.

**Ticket Price: \$ 40.00**

**Requested Tables or Tickets**

**\*\*\*Please fill out this form in its entirety\*\*\***

**Region (Circle Region)**

East

West

Southeast

Southwest

**CHECK THE  
APPROPRIATE BOX**

DISTRICT

CHURCH

INDIVIDUAL(S)

**NAME OF DISTRICT/CHURCH/INDIVIDUAL(S) ATTENDING**

More than 1 person attending may fill in additional names on the back side of this form. →

\*If you are a sponsor and/or will not be attending, you may still fill out this form in your name.

**# of Table(s) 8 per table \_\_\_\_\_ or # of Tickets \_\_\_\_\_**

**Total # of Tickets \_\_\_\_\_ Total Cost \$ \_\_\_\_\_**

**Return This Form (for Pre-Banquet Preparations)**

To: Pastor, Dwight Benoit, Congress General Secretary  
2830 Pine Street, Beaumont, Texas 77703 ~ (409) 832-2258 or (409) 201-0962

Received By: Friday, July 12, 2019

(Receipts and Tickets will be mailed immediately following your Purchase)

\*ANY REQUEST OF TABLES OR TICKETS AFTER FRIDAY, JULY 12, 2019 MUST BE PURCHASED AT THE CONGRESS!\*

# NAMES ATTENDING

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

5. \_\_\_\_\_

6. \_\_\_\_\_

7. \_\_\_\_\_

8. \_\_\_\_\_

9. \_\_\_\_\_

10. \_\_\_\_\_

11. \_\_\_\_\_

12. \_\_\_\_\_

13. \_\_\_\_\_

14. \_\_\_\_\_

15. \_\_\_\_\_

16. \_\_\_\_\_

17. \_\_\_\_\_

18. \_\_\_\_\_

19. \_\_\_\_\_

20. \_\_\_\_\_

21. \_\_\_\_\_

22. \_\_\_\_\_

23. \_\_\_\_\_

24. \_\_\_\_\_

## COMMITTEE USE ONLY

Date Received: \_\_\_\_\_

Payment Date: \_\_\_\_\_

Payment Amount: \_\_\_\_\_

Payment Type:      Cash              Check-# \_\_\_\_\_

                                 Money Order-# \_\_\_\_\_

Signature: \_\_\_\_\_

Mailed Ticket(s)	Yes	No
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Date Mailed: \_\_\_\_\_

Held Ticket(s)	Yes	No
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Ticket Number(s): \_\_\_\_\_