

Baptist Ministry Assistants of Kentucky
Membership Registration

Name _____

Home address _____

City _____

Zip _____

Work Phone _____

Home Phone _____

Cell Phone _____

Birthdate _____

Church / Organization _____

Position _____

Email _____

Membership Fee: \$15.00

Print this Membership Form and mail with your check payable to BMAK to:

Mary Jo Grinnell, BMAK
c/o Crossroads Baptist Church
P.O. Box 2601
Elizabethtown, KY 42701

Membership runs from January 1st through December 31st.