

## Member Application Form Make Checks Payable to: SBCA

Make Checks Payable to: **SBCA**Mail Member Information Form and Check To: **Kevin Perrigan, Carson Springs Baptist Conference Center**1120 Carson Springs Road, Newport, TN 37821

## **Member Information**

•	·			
Contact Person's Name: _	Title:			
Mailing Address:		/ PO D		
Street Address and/or PO Box				
City	State	Zip		
elephone:	Fax:	Cell:		
Susiness Email:				
ersonal Email:				
camp Website:				
Membership Rates				
lembership rates are bas	sed on Camp/Conference Center's a	nnual budget or income, whichever is I	argest	
	•	00-\$749,999 <b>- \$300</b>	J	
		1,500,000 & Up <b>- \$750</b>		
otal Enclosed: \$				
acility Information				
of Hotel Beds:	# of Dorm Beds:	# of Employees:		
iuest Type (i.e. youth, add	ult, etc.)			
easons Available:				
rograms offered:				

Location/Directions:			
	Distance to Airport:		
Owned/Operated by:			
Brief Description:			