UMACBA Application for Membership

www.umacba.org

New Member ☐ **Renewal Member** ☐ **For the calendar year** 2007

☐ Mr. ☐ Ms. ☐ Rev. ☐ Other _____

Name: _____ Job Title: _____

Business address: _____

Home address: _____

Business telephone: _____ Home telephone: _____

Preferred mailing address: Business ☐ Home ☐ Email address: _____

Church home: _____ Date joined: _____

Employed by: _____ Date employed: _____

Select One _____ _____ _____

Jurisdiction | Annual Conference | District

Full time ☐ Part time ☐ Clergy ☐ or Lay ☐ FCBA? Yes ☐ No ☐ Certified with UMACBA ? Yes ☐ No ☐

CE taken toward UMACBA recertification (and location) since last membership renewal:

I am interested in Certification and NICFA information at Candler School of Theology Yes ☐ Not at this time ☐

I am interested in: Volunteering as a certification mentor ☐ Having a certification mentor ☐ Not at this time ☐

I am interested in a UMACBA leadership role. Yes ☐ Not at this time ☐

Comments:

Signature _____ Date _____

Please complete and return with check for dues ($50.00) to:

General Council on Finance and Administration
Attn: Sheri Kimble
1 Music Circle North
PO Box 340029
Nashville, TN 37203-0029

UMACBA/ Membership Revised 11/13/06

UMA CBA