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Connecticut State Missionary Baptist Convention

17 West Avenue ~ Norwalk, CT 06854 ~ Phone: (203) 838-5717
~ www.ctbaptist.org ~ info@ctbaptist.org ~

March 17, 2018

Greetings,

We greet you in the name of our Lord and Savior Jesus Christ.

Registration for the Connecticut State Missionary Baptist Convention (CSMBC) Annual Banquet is now open and available online at www.ctbaptist.org. The banquet will be held on the final evening of our Convention, Thursday, May 10, 2018 at the Radisson Hotel Cromwell, 100 Berlin Road, Cromwell, CT 06416. Our dynamic banquet speaker will be the Rev. Dr. Carl Washington, President of the Empire State Convention.

Reservations and payment for the banquet are due by Sunday, April 29, 2018. Your cooperation is appreciated so that we may adequately plan with the hotel.

PLEASE NOTE the enclosed registration form for your church. Tickets will not be issued in advance. Please designate one person who will pick up the tickets for your church at the registration desk on the day of the banquet.

If paying through the website, go to ctbaptist.org, click on "Annual Session" and follow the prompts to register each person from your church.

If paying by check, please mail the completed reservation form and payment to:

Trustee Starr Merritt
65 Judy Lane
Stamford, CT 06906
Phone: 203-912-4643
Email: starrmerritt@yahoo.com

Your payment and reservations will be confirmed upon receipt.

If you have any questions, please do not hesitate to contact me. We look forward to a great Convention and a wonderful conclusion with our Annual Banquet. To God Be the Glory!

In the Spirit of Excellence,

Sister Starr B. Merritt
Banquet Chair

Rev. Dr. Lindsay E. Curtis, President
The Connecticut State Missionary Baptist Convention



Connecticut State Missionary Baptist Convention
Banquet - Thursday, May 10, 2018 @ 6pm
Radisson Hotel Cromwell
\$70 per person

BANQUET RESERVATION FORM
(1 Form Per Church)

Deadline: Sunday, April 29, 2018

Name of Church: _____

Pastor's Name: _____

Pastor's Email Address: _____

Contact Person: _____

Contact Person's Phone: _____

Contact Person's Email: _____

**Name of person who will pick up
tickets at the Registration Table:** _____

Meal Choices (\$70 each)

Meal Choice	Total
Beef	
Chicken	
Fish	
Total Number of Meals:	
Total Amount Enclosed:	

Please make check payable to CSMBC and mail check and reservation form to:

Starr Merritt
65 Judy Lane
Stamford, CT 06906
starrmerritt@yahoo.com

Reservation will not be complete until full payment is received.