



THE CHURCH NETWORK™

Don't Go It Alone.

**Houston Metro Chapter
Annual Membership Form
July 2021 – June 2022**

Name _____
(Please Print)

Title _____

Employer _____

(Please check which applies) Church Business Other _____

Are you willing to host a chapter meeting at your church? _____

If you are a new member, who referred you to TCN? _____

Type of membership (please check which applies):

- Active Associate Business Contributing Member
 Member Emeritus and Honorary Member (requires special application and approval)

- Member of The Church Network (TCN) - National
 CCA (Year Certified _____)
 In Certification Process (Date to be Certified _____)

Business Address _____

City _____ ZIP _____

Email Address (please print carefully) _____

Business Phone _____ Cell Phone _____

(Optional Information)

Home Address _____ City _____ ZIP _____

Home Phone _____

- \$50 Dues Enclosed** – Make checks payable to **NACBA – Houston**
 Check here if information should NOT be listed on the Houston NACBA website members-only directory

**Mail to: Bill Campbell, TCN Houston Treasurer
Northeast Houston Baptist Church
18000 W Lake Houston Pkwy
Atascocita, TX 77346**

Office use only:
Date Paid _____ CK# _____

- New Member