South Carolina Baptist Convention 2009 High School Graduating Seniors

Name of Church_____**Person Completing the Form**_____

Church Address _____**Ch. City**_____**Phone ( )**_____

Fax ( )_____ **E-mail address**_____ **Youth Minister/Worker**_____

Note: *If you mail or e-mail us a computer printout you already have of your high school seniors we would appreciate it if you would include the information listed above. If you would like to enter these names in Excel, please go to our website, www.scbcm.org , download the Excel file and email the completed form to the email below.*

PLEASE PRINT NEATLY

Name of Student	Home Address	City	State	Zip	Phone	E-mail	College Attending

Mail to Collegiate Ministry Group, 190 Stoneridge Dr. , Columbia, SC 29210 or email to coramullinax@scbaptist.org