

Convention Recap Report

(To be filled out by the Presenter after the event and faxed or mailed to NCBP.)

Presenter Name: _____

Convention Location: _____

Convention Date: _____

Number of Workshops Taught: _____

Approximate Number of Attendees in Each Workshop: _____

Resource Income Total: _____

Comments:

Please submit this form to the National Center for Biblical Parenting along with On-Site Purchase Forms that contain credit card information or orders.



76 Hopatcong Drive, Lawrenceville, NJ 08648-4136
Phone: (609) 771-8002
Fax: (609) 771-8003
Email: parent@biblicalparenting.org
Web: biblicalparenting.org