

South Texas Gospel Music Association, Inc

Church Membership

Church Name:	
Contact Person:	
Address:	
City:	
State:	
Zip Code:	
Phone:	
E-Mail:	
Web-Site:	
Pastor's Name:	
Birthday (Spouse's Name & Birthday also):	
Anniversary:	
Music Minister/Director's Name:	
Birthday (Spouse's Name & Birthday also):	
Anniversary:	

As a believer in spreading the gospel through song and testimony and as pastor of the above named church, I agree to membership in the South Texas Gospel Music Association, Inc.

I also agree that to remain an active church member of the South Texas Gospel Music Association, Inc. (STGMA, Inc), this church will host at least 1 music program per year, using music ministries from the STGMA, Inc.

_____ Date: _____
(Pastor's Signature)

When completed please mail this application to the following address:

STGMA, Inc
Attn: Secretary
P.O. Box 39745
San Antonio, TX 78218-6745

***Upon return of this application and becoming a member of STGMA, you will receive a newsletter (every month), a roster of all active performing ministries and a CD of some of our active ministries. **If you have an e-mail address and have high speed access, your newsletter will be sent electronically. You will need the Adobe Reader. You can download a free version if you do not have it on your computer.**

Note: The majority of STGMA, Inc. music ministries come on a love offering basis.