



**BIBLE QUIZZING NORTH CENTRAL (BQNC)**  
**Money submission form**

Please print this form and include the following information with your check made out to 'NCDCMA Quizzing'. Thanks!

Name of church or group: \_\_\_\_\_

Contact name: \_\_\_\_\_

Contact phone or email: \_\_\_\_\_

Money for (please put an 'X' preceding the fund)

- Yearly registration
- Crown Tournament registration
- Books
- Gift
- Equipment
- Internationals
- Scholarship
- Other (please specify) \_\_\_\_\_

Receipt requested

- Yes
- No

Signature: \_\_\_\_\_

Date sent: \_\_\_/\_\_\_/\_\_\_\_\_

Checks should be sent to:

North Central District CMA  
Attn: Doug Parkinson  
8860 College View Drive  
Saint Bonifacius, MN 55375

Official use only		
Date Received: ___/___/_____	Date processed: ___/___/_____	Initials: _____
Information forwarded to: _____		Date: ___/___/_____