

AMERICA FOR CHRIST OFFERING 2026



American Baptist Home Mission Societies

www.abhms.org/afc

The Wisdom and Power of Storytelling



JESUS TOLD THE CROWDS ALL THESE THINGS IN PARABLES; WITHOUT A PARABLE HE TOLD THEM NOTHING. THIS WAS TO FULFILL WHAT HAD BEEN SPOKEN THROUGH THE PROPHET
“I WILL OPEN MY MOUTH TO SPEAK IN PARABLES;
I WILL PROCLAIM WHAT HAS BEEN HIDDEN SINCE THE FOUNDATION.” MATTHEW 13:34-35 NRSVUE

IN-PERSON/VIRTUAL SPEAKER REQUEST FORM

SECTION A *Please complete all that apply.*

Today's Date (mm/dd/yy): _____ / _____ / _____

Contact: _____

ABCUSA Region: _____

Alternate Date(s): _____ / _____ / _____

Requested Date(s): _____ / _____ / _____

Region Event: Region Conference Area/Assoc. Meeting ABW/ABMen Conference
 Virtual Meeting Other _____

Local Church: Worship/Sunday School Mission Fair Church Retreat ABW/ABMen Youth

Please indicate which deputation costs your region/church/organization will cover:

Lodging Meals Transportation

Preferred Home Mission Speaker:

First Choice: _____ Second Choice: _____

Home Mission Speakers *Speakers are ordained ministers ** Speakers speak Spanish

Abigail Medina Betancourt***

Lisa Harris-Lee*

Alexzandria Sanchez

Meg Biddle*

Laura Miraz**

Ben Sullivan*

Abner Cotto-Bonilla***

Patricia Murphy*

Michele Turek*

Rothanglani Chhangte*

Marie Onwubuariri*

Curtis Ramsey-Lucas

Vincent Dent

Monique Sadler-Taylor

Erica Van Brakle*

Jeffrey Haggray*

Section B over

IN-PERSON/VIRTUAL SPEAKER REQUEST FORM

SECTION B

Please complete additional copies of SECTION B for each separate event.

Name of Church/Organization:

Church Ethnicity:

<input type="radio"/> African Amer.	<input type="radio"/> Asian	<input type="radio"/> Euro Amer.	<input type="radio"/> Haitian
<input type="radio"/> Latino	<input type="radio"/> Native Amer.	<input type="radio"/> Multi-Cult	<input type="radio"/> Other

Location/Address of Event:

Local Contact Person:

Contact E-mail:

Contact Phone: _____ - _____ - _____ Number of Attendees: _____

Pastor's Name:

Church/Pastor's E-mail:

Church Address:

Please describe event(s) and include speaker expectations:

Additional comments:

Because of scheduling and resource constraints, it may not be possible to fulfill all requests.

E-MAIL | kim.wilkins@abhms.org PHONE | 610-768-2413

This form can also be mailed to: Kim Wilkins, 1075 First Avenue, King of Prussia, PA 19406
If you have any questions, please call 610-768-2413.



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Please give today! | www.abhms.org/afc