



2019 Individual or Family Membership Renewal

(Please complete both sides)

Name: _____ Birthday: (Month/Day): _____

Address: _____

City: _____ Zip Code: _____

Email: _____ Phone #: _____ Home Cell

Optional:

Spouse/Partner Name: _____ Birthday: (Month/Day): _____

Spouse/Partner Email: _____ Phone #: _____ Home Cell

Would you like your financial contributions combined with your spouse/partner for tax purposes? Yes No

Special Needs: _____

Name(s) of Children involved in Unity	Date of Birth

I understand and support the mission and vision of Unity of The Blue Ridge. I choose to demonstrate my support to Unity through prayer, personal involvement, and personal support. I seek to live my highest Truth and I honor and support others as they live their highest Truth. I open myself to receive the abundant blessings that are available when I intentionally live my highest Truth.

I hereby declare my intention in renewing membership in Unity of the Blue Ridge for 2019.

Signature Date

Spouse/Partner Signature Date