

# HeartLight Spiritual Center

## -- Membership Form --



Name \_\_\_\_\_

Address \_\_\_\_\_

City / State/ Zip Code: \_\_\_\_\_

Email (*Please Print Clearly*) \_\_\_\_\_

Tel (\_\_\_\_\_) \_\_\_\_\_ Work (\_\_\_\_\_) \_\_\_\_\_

Occupation \_\_\_\_\_ (Optional)

Hobbies/Interest \_\_\_\_\_ (Optional)

Name and Age(s) of Child/Children attending HLSC \_\_\_\_\_

### Membership Opportunities:

- ✓ I will have the opportunity to have a voice through voting at Annual and Special Meetings
- ✓ I will have the opportunity to be dedicated and committed to my own Spiritual Growth
- ✓ I will have the opportunity to support the Center with my Time, Talent and Treasure
- ✓ After 6 months, I will have the opportunity to be nominated to serve on the Board of Advisors

**Please note:** All members must renew their membership every three years as per our current bylaws.

**Enclosed** is my tax-deductible gift of \$ \_\_\_\_\_ (Optional, but appreciated)  
**(Please make all checks payable to HLSC)**

You can also *DONATE* via PayPal on our website: [www.heartlightcharlotte.org](http://www.heartlightcharlotte.org) – **Thank you!**

### It Takes a Village!

***Count on me!*** I am interested in volunteering in the following areas.

_____ Sunday Service	_____ Greeting/Ushering	_____ Hospitality
_____ Youth Program	_____ Music/Choir	_____ Operations
_____ Special Events	_____ Membership	_____ Audio/Visual
_____ Office/Administration	_____ Marketing/Promotion	_____ Outreach

Signature \_\_\_\_\_ Date \_\_\_\_\_