

HeartLight Spiritual Center

-- Membership Form --

We invite you to JOIN HeartLight to be part of a community that will support you on your spiritual journey. No religious dogma to agree to or classes to attend to join!

Membership Opportunities/Benefits:

- ✓ I will have the opportunity to have a voice through voting at Annual and Special Meetings
- ✓ I will have the opportunity to support the Center with my Time, Talent, and Treasure
- ✓ I will have the opportunity to be listed in the Community Directory
- ✓ I will have the opportunity to contribute to, and/or request support from, the Angel Fund.
- ✓ After 6 months, I will have the opportunity to be nominated to serve on the Board of Advisors

Name _____

Address _____

City / State/ Zip Code: _____

Email (*Please Print Clearly*) _____

Cell (_____) _____ Home/Work (_____) _____



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 – Thank you!

Membership/Community Directory

A private directory for the members to reach each other. Option to include your occupation and/or skills/training for members to consult when seeking products and/or services.

Include your information available to members? **CIRCLE ONE: YES NO**

ie: Compassionate Care Team or other HLSC individuals or groups. (No Public Listing)

If Yes, please share birthday for care team to reach out: **Month/Day** ____/____

Optional: Share your occupation and/or skills/training below to be added to your membership listing:

Occupation _____ (Optional)

Skills/Training _____ (Optional)

Website: _____ Business email: _____ (Optional)

Signature _____ Date _____

Submit at Heartlight or Mail to: HeartLight Spiritual Center, 7300 Mallard Creek Rd, Charlotte NC 28262