

Membership Application Form

A Spacious Place: Creativity & Spirituality Center

Please fill out completely

Date _____

Name: _____ Email Address _____

Street Address _____
Street City State Zip Code

Phone Number(s) _____

I would like an individual membership for one year two years three years

I would like a Tier _____ membership for one year two years three years

- A Tier 1 Group Membership is 1 to 5 individuals
- A Tier 2 Group Membership is 6 to 10 individuals
- A Tier 3 Group Membership is 11 or more individuals

Names of the Other Members in my Tier Group:

Names of Associate Members (children under 12) in my Tier Group:

I would like to receive soul nourishment like:

I would like to nourish others by:

<p>For Office Use Only</p> <p>Amount Paid _____</p> <p><input type="checkbox"/> Monetary Payment</p> <p><input type="checkbox"/> In Kind Payment of _____</p>
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