



## New Member Application

<b>Office Use Only</b>	
<i>Member Classification</i>	
Date Given	
New	
Other Unity	
UOH Returning	

Name:			
Address:			
Cell #:			
Home #:		Work #:	
Work #:		Email:	
<b>Introduction &amp; History Class</b>			
Date Received	Facilitator	Facilitator Signature	
<b>Unity Class Attendance Fulfillment (three required)</b>			
Date	Facilitator	Facilitator Signature	
1)			
2)			
3)			
<b>Volunteer Hours</b>			
Area	Date	Time Tithed	Team Leader Signature

*Thank you for your interest in becoming an active member of Unity of Hollywood; we look forward to a mutually satisfying and spiritually fulfilling relationship. Please deliver this form to Carol Boudreau after all requirements and classes have been met. It is your responsibility to maintain and keep this form in good order until you hand it in. Copies are not kept; re-establishing previously done work is the responsibility of the prospective new member.*

Future New Member Signature: \_\_\_\_\_