

Spiritual Kinship Society Trust

MEMBERSHIP ENROLMENT FORM

Name of Applicant: _____

Address: _____

_____ P/code _____

Telephone No.: B/Hours: _____ A/Hours: _____

I/we would like to help the Spiritual Kinship Society in the following way:
(please circle)

Committee work, Fund raising, Helpline enquiries, Mail outs, Public relations,
Advertising/Promotional work, Sponsorship, Mediumship - Healing,
Demonstrating, Bereavement sittings, Speaking, Other ideas - Please attach.

I/we would like to make a donation and enclose \$ towards the cost of
membership mailings; and/or enclose \$ towards furthering the Society's aims
and objectives. Yes, I would like a membership badge.

Signature: _____ Date: _____

Please print, complete, and mail to:

WOODLANDS SANCTUARY FOUNDATION
3 WOODLAND WAY
GRUYERE VIC. 3770
(03) 5964 9432