



Church Membership Application

**Spiritualist Fellowship Church of New England**

131 River Road, Andover, MA 01810

Print Name \_\_\_\_\_

Street Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone \_\_\_\_\_ Birthday (month & day) \_\_\_\_\_

Email \_\_\_\_\_

Occupation (optional) \_\_\_\_\_

Have you ever been a member of another church? \_\_\_ Yes \_\_\_ No If yes, name of most recent church

Reason for leaving \_\_\_\_\_

HAVE YOU EVER BEEN CONVICTED OF A FELONY? YES \_\_\_ NO \_\_\_ Board Approval may be needed

**APPLICANT STATEMENT**

I hereby apply for membership in the Spiritualist Fellowship Church of New England. I confirm my belief in the Religion of Modern Spiritualism and the acceptance of its Declaration of Principles. I further confirm that I am familiar with the Science, Philosophy, and Religion of Spiritualism. I state that I have received satisfactory evidence of the continuity of life through the demonstration of mediumship

Applicant Signature \_\_\_\_\_ Date signed \_\_\_\_\_

Recommended by 1 \_\_\_\_\_ 2 \_\_\_\_\_

Board/Membership Approval Date \_\_\_\_\_ Right Hand of Fellowship Date \_\_\_\_\_

Pastor Signature \_\_\_\_\_

Church Secretary Signature \_\_\_\_\_