Declaration of Membership

Unitarian Universalist Church of Palo Alto

I have read and accept the principles of this church. I accept the privilege of voting at congregational meetings and the responsibility of supporting the church financially, including a yearly contribution of record. I will support the church by my presence in this community. I am at least 15 years of age or have successfully completed the Coming of Age program.

Name(s):	
	Office:
Cell:	Cell:
Email:	
Email:	
Signed:	
Date:	
Names of Children Living at Home:	Dates of Birth:

Membership will be most rewarding to you if you become involved in some of the many programs and volunteer activities at the church. **Please fill in the reverse side of this sheet** to let us know more about you, highlighting areas of most interest to you/your family.

Many thanks.

Where do you work if you work outside	the home?
If so, what kind of event would you like t	to invite them to?
Do you have any friends who might also	benefit from being here?
	in future?
What most attracts you to UUCPA?	
Other Finally, we'd appreciate your sharing sor help us make UUCPA an even more thrive	me more information and thoughts that will ving community:
Speaking/writing	Leadership skills
Offering office skills	Event planning/delivery
Gardening/landscaping	Financial acumen
Using fine arts skills	Maintaining facilities
To help us develop a talent bank, we'd li Meeting and greeting people	ke to know if you enjoy: Using technical skills
,	, ,
involved in, and what volunteer activitie	<i>y</i>