



BE A PART OF THE AFFIRMATION VISION!

___ I want to be more involved in the vision of Affirmation, nationally or locally

___ I am interested in connecting with like-minded people in my area.

___ I do / ___ I don't have Internet access.

___ I would like to receive communication by email.

I want to join Affirmation! _____

Annual membership \$35.00 (\$10.00 Low Income)

I pledge \$_____ paid ___ monthly ___ quarterly

___ A one time payment of _____.

___ Check enclosed ___ Visa ___ Mastercard

Expiration: _____

Card number _____

Signature _____

Enclosed is a donation of \$ _____. (You can also donate online)

Name: _____

Street Address: _____

City _____ State _____

Zip _____ Phone _____

Annual Conference _____

Email Address: _____

I want a ___ call / ___ email about major gifts.

___ I will pray for Affirmation.

Mail this form to: Affirmation, P.O. Box 1021, Evanston, IL 60204 or contact us at
umaffirmation@yahoo.com.

All Affirmation correspondence is mailed discreetly. Contributions to national Affirmation are tax deductible.