



APPLICATION FOR INDIVIDUAL MEMBERSHIP

Name:	: Date of Birt	th:
Addre	ss:	(optional)
Telephone: please attach a recent		
(home) (work) photograph of yourself		
Occupation:		
Religious Background:		
Special Skills or Talents:		
	■ REQUIREMENTS FOR M	EMBERSHIP (1)
To be accepted as a Member of a Society or a Member-At-Large of The Urantia Book Fellowship, you must		
₹ PLEASE CHECK ALL BOXES THAT APPLY ₹		
	Have read the entire <i>Urantia Book</i> (Society Founders only)	
	Affirm your belief in the teachings of The Urantia Book	
	Be willing to continue to study <i>The Urantia Book</i> and attempt to live your life and foster	
	your spiritual growth according to your highest co	omprehension of its teachings
	Be willing to abide by The Fellowship's Constitution and by-laws, and support its	
Ш	purposes as stated in its Constitution	tion and by laws, and support its
Ш	Pledge to strive within the limits of your ability and wisdom to start or encourage the	
	organization of an informal group in your area to	study The Urantia Book.
Signat	ture:	Date:

THE PURPOSES OF THE URANTIA BOOK FELLOWSHIP ARE the study and dissemination of the teachings of *The Urantia Book*; the promotion, improvement, and expansion among the peoples of the world of the comprehension and understanding of Cosmology and the relation of the planet on which we live to the Universe, ighthereof of the genesis and destiny of Man and his relation to God, and > of the life and teachings of Jesus; and the inculcation and encouragement of the realization and appreciation of the Fatherhood of God and the Brotherhood of Man in order to increase and enhance the comfort, happiness, and well-being of Man, as an individual and as a member of society, > by fostering a religion, a philosophy, and a cosmology which are commensurate with Man's intellectual and cultural development, through the medium of fraternal association, ever obedient and subservient to the laws of this country and of all countries wherein The Fellowship may extend. **80** CHECK THE MEMBERSHIP WHICH APPLIES **CR** \square As a new Society Member of: ☐ As a Founding Member (Society Name) _ (Signer of Society Charter as Established Reader) ☐ As a Member-At-Large ☐ As a Charter Member (Non Society Member) (Signer of Society Charter) ₹ Please print or type. Use additional sheets as needed to respond to the questions below. € Some How (and when) did you become acquainted with *The Urantia Book*: • What experience have you had in study groups? Solution Why do you wish to become a member of The Urantia Book Fellowship? Solution Name a member of The Fellowship who recommends you (Member-At-Large applicants only) 80@c3 Thank you for your willingness to join with us in The Urantia Book Fellowship's efforts to disseminate the teachings of *The Urantia Book* to the peoples of the world. PDF to: Fellowship@UrantiaBook.org or Fax: 303.403.4091