

To Become a member

**Fill out the form below and send it
with check or money order to:**

**Unity Hall
P.O. Box 909.....
Fairfield, Ca. 94533**

Membership Signup:		
Name:	_____	
Phone:	_____	
Address:	_____ _____	
Email:	_____	
		Monthly Pledge Amount: \$ _____
		Annual Contribution: \$ _____
Would you like a monthly reminder sent by email? Y / N		