

Chalice Lighter Enrollment Form
Helping more light to shine in Northern New England!

Name(s) _____
Address _____
City _____ State _____ Zip _____
Phone _____ E-mail _____
Congregation _____



I/We wish to support and foster the growth of Unitarian Universalism. I/We pledge to contribute \$15 or more, three times a year.

Signature(s) _____

Please make checks payable to NNED-UUA. Write "Chalice Lighter" in the memo line.

Mail to: Chalice Lighter Program, Northern New England District, 10 Ferry St., #318, Concord, NH 03301