



Lighthouse Spiritual Centre

5722 176– Street, Surrey, B.C. V3S 4H2

Telephone: 604 574-1918

Minister: 604 539-0770

President: Liz Dingwall

Minister: Rev. Anne Larson

ASSOCIATE MEMBERSHIP APPLICATION

1. Show an interest in Lighthouse Spiritual Centre.
2. Show an interest in Spiritualism as defined:

Spiritualism is a Science, Philosophy, and Religion of continuous life based upon the demonstration of communication with Spirit, by means of mediumship, with those who live in the Spirit World.

Spiritualism is a **Science** because it investigates, analyses, and classifies facts and manifestations demonstrated from the spirit side of life.

Spiritualism is a **Philosophy** because it studies the Laws of Nature both on the seen and unseen sides of life and bases its conclusion upon present observed facts. It integrates wisdom from the past with present day knowledge.

Spiritualism is a **Religion** because it strives to understand and to comply with the Physical, Mental, and Spirit Laws of Nature, which are the Laws of God.

A Spiritualist is one who believes in the communication between this world and the Spirit World, and who endeavours to live in accordance with the highest teachings derived from such communication.

Spiritualist Mediums are individuals who have developed their innate natural psychic abilities and are able to tune into the vibrations of the Spirit World. The expectation for mediums that work at the Spiritualist Centre is that they are able to provide evidence of survival.

Evidence of survival refers to the medium's ability to describe individuals who have passed into spirit so that they are recognizable to a person receiving a message. As well, mediums bring guidance and support from Spirit, which demonstrates that Spirit is aware of circumstances in a person's life.

Spiritualist mediums also serve as the channels for guides and enlightened teachers to bring higher spiritual teachings and new knowledge to humanity.

Spiritual Healing is defined as the healing of an individual through God's Universal Healing Energy that is channeled through Spiritual Healers.

The Phenomena of Spiritualism consists of Clairsentience, Clairvoyance, Clairaudience, Psychometry, Spiritual Healing, Trance, Automatic Writing and Painting, Inspirational Speaking and Writing, Prophecy, and many forms of Physical Phenomena such as Materialization, Apports, Levitation, Telekensis, Direct Voice, Acoustics (raps and sounds), Spirit Photography, and other manifestations proving the effect or presence of Spirit on the material plane.

3. An Associate Membership with Lighthouse Spiritual Centre may be applied for at any time for the first time applicant and may be granted following approval by the Board of Directors at their next regular Board Meeting. This membership is valid for one year.
4. There is an annual fee, as set by the Board of Directors, for this level of membership.
5. Applicant must be at least eighteen years of age.
6. An Associate Membership entitles one to a discount at Thursday Evening Open Circles and Mini Workshops.
7. An Associate Member may attend the Annual General Meeting but does not have voting privileges with Lighthouse Spiritual Centre.
8. **After a minimum of six months as an Associate Member and having attended a Lighthouse Spiritual Centre Orientation Session application may apply for full membership. Full Membership is subject to approval by the Board of Directors.**
9. At the end of one year at the Associate level the individual will be notified that their membership is near completion of the first year. If you wish to remain as a member of Lighthouse Spiritual Centre and having fulfilled the commitment as outlined you may apply for Full Membership.
10. Should this membership not be maintained the Board of Directors is required to remove the name from the organization in accordance with the By-Laws of the Society.



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Application For Associate Membership

I hereby wish to make application to the Lighthouse Spiritual Centre for membership @ \$20.00 per year.

Name: _____
(Please Print Clearly)

Home Address: _____
_____ Postal Code _____

Mailing Address: _____
_____ Postal Code _____
(If different From Above)

Telephone Number: _____ Cell Number: _____

Birth date: _____ \ _____ \ _____ Email: _____
mo day year (opt.)

Signature: _____

Date: _____

I do understand that this application is subject to approval by the Board of Directors and is renewable annually.

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For office use only:

Date Received: _____ Fee Enclosed: _____

Board Approved: _____ Card Issued: _____

July 2018