



Arizona Interfaith Movement  
(AZIFM)  
Membership Application

Our mission is to build bridges of understanding, respect and support among diverse people of faith through education, dialogue, service and the implementation of the Golden Rule.

**Types of Membership** *(See back for details)*

**Please select one:**

- Interfaith Council (Faith Group \_\_\_\_\_)  
Individual / Student / Congregational
- Golden Rule Partner, Individual / Student / Congregational
- Golden Rule Partner, Corporate

Name \_\_\_\_\_

E-mail \_\_\_\_\_

**My commitment to AZIFM:**

*(please add check marks to indicate affirmation)*

- Live and promote the Golden Rule.
- Treat people, no matter their faith, nationality or culture, with love and respect.
- Educate myself on the different faiths represented by AZIFM.
- Encourage others to join AZIFM.

**Additionally for Interfaith Council Membership only:**

- Volunteer time with AZIFM for events; serve on a committee.
- Make a financial contribution to expand the reach of this movement.
- Share from my faith tradition at AZIFM activities without proselytizing.

Over please

**Please indicate which membership you desire:**

- Golden Rule Partner Membership (Individual / Corporate):**
  - Be willing to adhere to the AZIFM Commitment on side 1.
  - May participate in all AZIFM events and programs.
  - May serve on Committees.
  - May attend Interfaith Council Meetings without voting privileges.
  - Not necessary to be a member of a 501(c)(3) Religious Organization.
  - Annual Dues: \$25 - individual; \$15 - Students; \$100 or more - Corporate.
- Interfaith Council Membership (Individual / Congregational):**
  - Is a member of a recognized 501(c)(3) Religious Organization.
  - Be willing to adhere to the AZIFM Commitment on side 1.
  - May attend all Interfaith Council Meetings with voting privileges.
  - *Congregational Members* may have one vote, collectively.
  - May attend all AZIFM events and serve on Committees.
  - Annual Dues: \$25 / \$15 - Students. \$100 or more - Congregational

Signature: \_\_\_\_\_, Title

Welcoming AZIFM Member: \_\_\_\_\_

Payment Method:  Check  MC  Visa \$ \_\_\_\_\_

Name on Card: \_\_\_\_\_

Billing address: \_\_\_\_\_

City/Zip: \_\_\_\_\_

Phone number: \_\_\_\_\_

Card # \_\_\_\_\_

Exp. Date \_\_\_\_/\_\_\_\_ (mo/yr) Security Code: \_\_\_\_\_

AZIFM is a 501(c)(3) non-profit; contributions are tax deductible.  
AZIFM reserves the right to accept and approve all applications.

[www.Azifm.org](http://www.Azifm.org)

Rev. Larry Fultz, Executive Director - Larry@azifm.org