



Pledge and Affirmation July 1, 2024 - June 30, 2025

A signed Pledge and Affirmation form is required each church year (July-June) to establish and maintain member voting privileges. Submission of this form indicates your support and affirmation of the mission, covenant & operations of Berrien Unitarian Universalist Fellowship.

Mission: For every individual searching for spiritual meaning Berrien Unitarian Universalist Fellowship provides a welcoming and caring religious community dedicated to diversity, social justice, and peace for all.

Covenant: We of the Berrien Unitarian Universalist Fellowship agree and promise to provide a caring community that nurtures and respects the worth and dignity of each person, recognizes the interdependence of all living things, supports the individual in the search for spirituality and the explorations of the mysteries of life, and extends itself into the world in which we live.

Pledge of Support: We all share in supporting our fellowship. Pledges of any amount are deeply appreciated.

I / We will support BUUF with a financial pledge for the July 1, 2024 - June 30, 2025 church year, in the amount of: \$ _____ to be fulfilled: ___ weekly ___ monthly ___ quarterly ___ lump sum

I / We will support BUUF with an in-kind pledge for the July 1, 2024 - June 30, 2025 church year. Select all that apply. Training provided as needed. ___ mowing ___ snow plowing ___ gardening ___ cleaning ___ septic monitoring ___ accompanist ___ special music ___ social media mgmt ___ video editing/posting ___ Zoom tech ___ childcare **Please indicate the value of your in-kind pledge \$ _____**

Your generosity keeps BUUF going, thank you. Please select all that apply.

- First time giver
- Step Up Giver: This year's pledge is at least 5% greater than last year's
- Fair Share Giver: This pledge is 2% or more of my/our income
- One time donation
- I would like information about including BUUF in my will

A subscription to UU World magazine is included with your pledge.

Sign me up for a mailed copy Continue my subscription I will view the magazine online

Name _____ Signature _____ Date _____

Address _____ Phone number _____

Email _____ Date of Birth (MM/DD) _____

Name _____ Signature _____ Date _____

Address _____ Phone number _____

Email _____ Date of Birth (MM/DD) _____

Children and Birth Date (MM/DD/YY) _____

~ Thank you for your generosity ~

Return signed form to BUUF's Treasurer, 4340 Lincoln Avenue, St. Joseph, MI 49085 or Treasurer@BerrienUU.org