



A Search for God Study Group Affiliation Form

Please help us to serve you and others most effectively. Whether or not your group is still meeting, please take the time to complete this form so that our official roster of study groups is accurate and helpful to all.

(Date)

(Name of person filling out this form)

Return to: Association for Research & Enlightenment, Inc.
Win Howie
9 Bramble Circle
Rockland MA 02370
Phone: 1-(781) 878-3828
Email: cayce-northeast@comcast.net

Group Name, Number, State (i.e., Virginia Beach #7, VA) _____

Group 7-digit ID Number _____ Region _____

Chair/Contact Person _____

Tel _____ Email _____

Address _____ City _____ State _____ Zip _____

Group Meets _____ on _____ from _____ to _____
City and Zip Day of Week Time

(Please indicate)

Our Group is: New Re-affiliating Re-activated Inactive Disbanded

Please refer interested people to us: Yes No

The Study Group Department welcomes your suggestions, ideas or comments as to how we can better serve your group's needs: _____

(Please provide the requested information on the back of this form.)

The Study Group Department is funded entirely by contributions from individuals and from groups such as yours. We thank you for your continued support and want to remind you to add "Study Group Department" on your contribution envelope. Bless you in this and in all things!

"Use then, that thou hast in hand today, and He may increase it—yea thirty, yea sixty, yea an hundred fold—if ye but hearken and trust wholly in Him" — Edgar Cayce reading 1809-1

The Northeast Region of the A.R.E.®
<http://www.are-northeast.org/>

Association for Research and Enlightenment, Inc.
<http://www.edgarcayce.org/>

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Group Name, Number, State _____

Having the names and addresses of group members enables us to serve everyone who is involved in study group work with suggested workshop materials, notices of activities within your area, etc. Please include all zip codes.

Please pass this form around in your meeting and have members give us the information requested.

Name _____

Address _____

City _____ State ____ Zip _____

Tel _____

Email _____

Name _____

Address _____

City _____ State ____ Zip _____

Tel _____

Email _____

Name _____

Address _____

City _____ State ____ Zip _____

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