

**The Greater Boston Church of Spiritualism**

32 Church Street

Watertown, Ma 02472-3836

**MEDIUMSHIP AFFIDAVIT**

This form may be completed by those who have received **absolute evidence**, through our medium, **that life is continuous**. We ask that you list the specific evidence that our medium could not have possibly known prior to your reading. Your signature assures us that your reading has convinced you, beyond any doubt, that your loved one has made contact through our medium with you. **Thank you.**

**Name of Medium:** \_\_\_\_\_ **Date of Reading:** \_\_\_\_\_

**Your Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Specific Evidence recognized :** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Result(s)** of this reading in your life. Please list your reaction to the information that you have received. & let us know if you feel it has helped to heal your grief and move on in your life. We welcome your comments, feel free to use the back of the form:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

*In the event that this information is needed to help others understand that mediumship is a fact, that life truly is continuous and that it can bring healing to many lives, I give permission for this information to be published.*

\_\_\_\_\_  
**Signature**

*I give permission for you to publish my name and the name of my loved one \_\_\_\_\_*

*I prefer you do not publish my name \_\_\_\_\_ (Please check your preference and initial)*

**Witness:** \_\_\_\_\_

**Date:** \_\_\_\_\_