

Application for Membership in the Brotherhood of Satan

The following may be printed out and, upon completion, mailed to:

Brotherhood National Office, P.O. 2069, Toccoa, Georgia 30577-2069 USA

Or you can register online 24x7 at <http://www.brotherhoodofsatan.com/register/>



Make Out all Check or Money order Payments to BOS.

You may submit this application along with your **Registration Statement and the non-refundable \$66.60 Registration fee.**

Note: The non-refundable \$66.60 fee is for Registration as a Member at Large of the Brotherhood of Satan. Active Members at large may apply for Initiate status, with no additional fee. Be aware that if you resign your membership in the Brotherhood of Satan, or if your membership is terminated by the Satanic Illuminati Council USA of the Brotherhood of Satan, you will not receive a refund of this fee, and you will be treated as if you never were a member, so if you decide at some future point to re-register you will have to pay the fee again.

As a Member at Large you are entitled to many benefits including:

Lifetime Membership in our Offline organization and access to gatherings, meetings and rituals!

Special access to the Clergy of the Brotherhood of Satan

Special reduced pricing for all Brotherhood of Satan Events (*this alone is worth the \$66.60*)

Special reduced pricing on all purchases from the Brotherhood of Satan Stores!

Opportunity to become an Initiate of Satan where more powerful rituals and spells are taught.

Dark Magickal and Brotherhood Ritual Training.

You will gain Access to Secret Brotherhood Spells (*Never Before Seen by anyone outside of the Brotherhood a priceless value*)

The opportunity to connect with other Brotherhood of Satan members Local and International

The opportunity to share your own business offerings with other Brotherhood members (*We support Satanic Vendors*)

To be part of the Brotherhood Community (we are everywhere)

Stay Tuned More benefits to be added as we grow

Special Note As you advance into the higher levels of the Brotherhood you will not have to pay any additional registration fees, and new membership cards and certificates of achievement will be presented Free of Charge*

To Learn more about the Brotherhood of Satan visit our Website

www.BrotherhoodofSatan.com

Contact us by phone (206) 666-6062, Fax 206-666-6062

Mail Po. Box 2069, Toccoa, Georgia 30577

For Credit card Orders Only.

Which Credit card do you wish to use?

_____  _____  _____  _____ 

Credit Card Number: _____

Expiration date (MM/YY): _____/_____

Name as it Appears on your Credit Card: _____

Security Code (3 digit number on the back of the card in the Signature block) _____

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Provide answers to all questions to the best of your ability. All data is held in strict confidence.

PART I

(Complete Legal Name)

First Name : _____ Last Name: _____

Primary Telephone number to reach you: _____

Physical Mailing Address: _____

City: _____ State/Province: _____

Zip code: _____ Country: _____

E-mail: _____

ON A SEPARATE SHEET OF PAPER PLEASE ANSWER THE FOLLOWING:

What is your knowledge of the Brotherhood if any?

If you have any Background with Satanism please summarize your experience!

Why do you wish to join the Brotherhood?

How do you think the Brotherhood will benefit from your membership?

Share with us more of your philosophical point of view regarding the LHP (Left Hand Path).

What are your expectations from the Brotherhood?

PLEASE ENCLOSE A RECENT PHOTOGRAPH WITH THIS MEMBERSHIP APPLICATION

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“I the undersigned affirm that; I am of Legal age of consent (18 or older) and I attest to the truth and validity of the provided information of this application. I also affirm that I will include a photograph of myself with this application.

Provide your signature attesting to the accuracy of the Information provided in the application, and enclose photograph.

_____ Date: _____

Applicant's Signature

FOR OFFICE USE ONLY:

Initial Application Processing Date _____ Photograph Enclosed _____

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