

MY FUTURE LIFE PLAN – MY CHOICE

Fill in the blanks below:

1. My future name will be _____.
2. Gender _____
3. Hair Color _____
4. Height _____
5. Weight and/or body type _____
6. Eye colors(s) _____
7. Teeth (condition) _____
8. Eye Sight _____ (20/20 , x-ray vision, infrared vision)
9. Place of birth City _____ State _____ Other _____ (A future Earth without war/dualism, Phoenix Galaxy. Alpha Centuria, Crab Nebula, 23rd Universe)
10. I will have the following tattoo _____ located on my _____
11. I have a scent. It is _____ (ex: roses)
12. My State of Mind: Open Minded to all Probability ___Yes ___No

OPTIONS - FUTURE LIFE

Check Yes or No:

1. Genius qualities Yes ___ No ___ (list areas: mathematician, artist, scientist, writer, engineer, marine biologist, overall Genius, etc)

2. Athletic Prowess – Supreme Physical Condition Yes ___ No ___
3. Diseases Yes ___ No ___ (write it out of your genetics)
4. Karma Yes ___ No ___ (write it out by answering NO, your current life experience is now wisdom, nothing needs a ‘re-do’)
5. I will be born into a family of wealth and will have unlimited wealth my entire life?
Yes___ No___
6. I will be free of limitation(s)? Yes ___ No ___
7. I will be forward thinking loaded with ideas that evolve humanity? Yes___ No___

END OF CURRENT LIFE OPTIONS

1. I want to leave my body without pain or suffering? Yes ___ No ___
2. If I linger in death, I would like great beings to come and teach me and/or take me on UFO travels? Yes ___ No ___
3. I want to meet my relatives at the light? Yes _____ No _____ (Name them: _____)
4. After death I will return and show my family that I live beyond the body? Yes _____ No _____
5. In my light review I want to go to the past and see my most productive life? Yes ___ No ___
6. In my light review I want to see the life before this one and its' life review and all that was written before I incarnated? Yes ___ No ___
7. In my light review I want to see the greatest possible choices I can make for my future life. I will not have any guilt or regret about my current life. All experiences will be wisdom. I am free to go forward? Yes ___ No ___
8. In my light review, I want to remember who and what I am from the beginning of my Is-Ness? Yes ___ No ___
9. In my light review I want to peer far into the future. I will open my Mind to quantum probabilities that will enable me to choose the most unlimited possibilities to experience? Yes ___ No ___

ADDITIONAL COMMENTS:

Date: _____

_____ (Print Name) Witness: _____

_____ (Signature) _____ (Signature)

(Note: You can add or delete anything you desire. You can update your plan as often as you like. There are no rules when designing your new life. Additional comments can be made on a separate page. Once the form and comments are complete, sign it, get notarized (optional), and mail the document to your self, certified mail. Once mailed, it is a Contract with your future, signed sealed and delivered. Once received in the mail, place it with your Will/Personal effects. Write on the outside of the envelope, 'Open upon Death'.)