

GARDENA BUDDHIST CHURCH

YEAR 2016 MEMBERSHIP APPLICATION FORM

Please **PRINT** and return with your check. Thank you.

SINGLE MEMBERSHIP

_____ Last Name _____ Mr. () Mrs. () Ms. () Dr. ()
 _____ First Name _____ Middle Name _____
 Name in Kanji (Optional) _____ Birth date _____ / _____ / 19
 Address _____
 City _____ State _____ Zip _____
 Phone () _____ E-mail _____
 (Area Code) (Please Type or Print)

COUPLE MEMBERSHIP

HUSBAND

_____ Last Name _____ Mr. () Dr. ()
 _____ First Name _____ Middle Name _____
 Name in Kanji (Optional) _____ Birth date _____ / _____ / 19

WIFE

_____ Last Name _____ Mrs. () Dr. ()
 _____ First Name _____ Middle Name _____
 Name in Kanji (Optional) _____ Birth date _____ / _____ / 19

Address _____
 City _____ State _____ Zip _____
 Phone () _____ E-mail _____
 (Area Code) (Please Type or Print)

Membership Dues for Year 2016

<input type="checkbox"/> SINGLE	\$210	Renewal () New ()
<input type="checkbox"/> COUPLE	\$420	Renewal () New ()
Gardening Donation	\$5.00 / person / year	\$10.00 / couple / year
Total Enclosed	_____	

★ Please make check payable to: **GARDENA BUDDHIST CHURCH**

Please check organization(s) you belong to:

	SINGLE or HUSBAND	WIFE
ABA	<input type="checkbox"/>	<input type="checkbox"/>
BWA	<input type="checkbox"/>	<input type="checkbox"/>
CHURCH BOARD	<input type="checkbox"/>	<input type="checkbox"/>
DANA GROUP	<input type="checkbox"/>	<input type="checkbox"/>
DHARMA SCHOOL PARENTS	<input type="checkbox"/>	<input type="checkbox"/>
HUI AIKANE	<input type="checkbox"/>	<input type="checkbox"/>
JAPANESE SCHOOL PARENTS	<input type="checkbox"/>	<input type="checkbox"/>
OTHER _____	<input type="checkbox"/>	<input type="checkbox"/>

Office Use Only

<input type="checkbox"/> CHECK IF NEW MEMBER	(SINGLE) OR (H)	(W)
MEMBER NO.	_____	_____
NAME	_____	_____
DATE RECEIVED	_____	_____
CHECK NO.	_____	_____
DUES PAID	_____	_____
GARDENING FEE	_____	_____
TOTAL PAID	_____	_____