1340 Kern Street Fresno, California 93706



## **Buddhist Temple**

Tel. (559) 442-4054 Fax (559) 442-1978

O Mr. O Ms.	2017 Membership Form								
- IIIIO. • DI.	Last Name	First	First Name		Middle Name		Birthdate		
Marital Status:	O Married	o Single	O Widowed	O Other	С	urrent Betsuin Mem	ber?	O Yes	O No
Spouse	Last Name		First	Name	N	Middle Name		Birthdate	
Address	Street				City	State		Zip	Code
Telephone	Home	Work	ζ		Work – Spo	use			
Occupation				Spouse's C	occupation				
	ation purpose			21 living at h Middle Nam		ast name if different	from abo	ve.	
Last Name						<u>Birthdate</u>	• •	o Da	ughter
									ughter
MEMBERSHIF									
Family Membership:  □ Couple □ Couple w/dependent children			<u>Annu</u> en \$720		<u>Semi-Annu</u> \$360.00	Quarterly \$180.00		Monthly \$60.00	
<ul><li>Individual Membership:</li><li>□ Single □ Single with dependent children</li></ul>			Annu ren \$360		<u>Semi-Annu</u> \$180.00	Quarterly \$ 90.00	Monthly \$30.00		
Student Membe	e <b>rship</b> : (Parei	nt(s) not men	<u>Annu</u>						
E-Mail Addresse	s:								

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