

GARDENA BUDDHIST CHURCH
1517 W. 166th St., Gardena, CA 90247

YEAR 2023 HOUSEHOLD MEMBERSHIP APPLICATION FORM

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

HOME Address _____ City _____
State _____ Zip _____

MEMBER #1 Last Name _____ Mr. () Mrs. () Ms. () Dr. ()
First Name _____ Middle Name _____
Name in Kanji (Optional) _____ Date of Birth _____

Phone (_____) _____ **E-mail** _____
(Area Code)

MEMBER #2 Last Name _____ Mr. () Mrs. () Ms. () Dr. ()
First Name _____ Middle Name _____
Name in Kanji (Optional) _____ Date of Birth _____

Phone (_____) _____ **E-mail** _____
(Area Code)

Membership Dues for Year 2023

Member #1 \$250 Renewal () New ()
 Member #2 \$250 Renewal () New () Total Enclosed \$ _____

★ Please make a check payable to: **GARDENA BUDDHIST CHURCH** and
mail it with this form to: **Gardena Buddhist Church Membership**
1517 W. 166th St.
Gardena, CA 90247

Please check the box if
you already participate in any of
these activities / organizations

Please check the box if
you are interested in
receiving information

	Member #1	Member #2	Member #1	Member #2
Buddhist Education	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth Organizations (Boy Scouts, Girl Scouts)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dharma School (Nursery through High School)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dharma School Teachers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Adult Buddhist Association (ABA)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Young Adult Buddhist Association (YABA)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Buddhist Women's Association (BWA)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dana Group	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hui Aikanes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ichi Mi	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cultural Classes (Tea Ceremony, Flower Arranging, Taiko)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wisteria Chugakko Summer Program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Japanese Language School	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Nakayoshi Pre-School	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

FOR OFFICE USE:

Member #1 _____ Chk # _____ Date Rcvd _____
Member #2 _____ Chk # _____ Dues \$ _____
Check if New Member Total \$ _____