SEATTLE BETSUIN BUDDHIST TEMPLE APPLICATION FOR SARANA AFFIRMATION CEREMONY

| Name | | | | |
|-----------------------------|---------------------------------------|---------------------|-----------------|--|
| Last Name | First Name | Middle | Middle Name | |
| Address | | | | |
| Street | City | State | Zip | |
| Age: Date of Birth | Male / Female 7 (circle) | Telephone: () | | |
| Name of parent or guardian | | | _ (if under 12) | |
| | e sure to fill-in the favorite wo | rd/kanji character) | | |
| Homyo Selection: To be comp | * * * * * * * * * * * * * * * * * * * | | h applicant. | |
| Homyo (Kanji): | Reading: | Meaning: | | |
| | * * * * * * * * | * | | |
| | | | | |
| | Signature of applicant | | | |
| | | | | |
| Signatur | re of parent/guardian if applican | nt is under 12 | | |

Please print. Return this form along with a \$25 processing fee to: Seattle Betsuin, 1427 S. Main St, Seattle, WA 98144