

**SEATTLE BETSUIN BUDDHIST TEMPLE**  
**SUSTAINING MEMBERSHIP FORM**



Thank you for your sustaining membership in the Seattle Betsuin Buddhist Temple ("Temple"). Your membership will assist the Temple in continuing its Jodo Shinshu Buddhist programs. **Please complete the below information for our records if you are new to the Temple or your information has changed.** We use the information gathered to communicate to our members and get a census of our Sangha. It will not be distributed to outside third parties.

**Dues per Individual: minimum of \$300.00 (under the age of 70) or \$250.00 (70 years of age and over)**

	<b>First Name</b>	<b>Middle Name/Initial</b>	<b>Last Name</b>
<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Dr.			
Occupation			
Email Address			
<i>The Temple has a weekly e-mail newsletter regarding important events or news. You will receive this weekly e-mail unless you opt out by checking this box.</i>			<input type="checkbox"/> Opt-out
Home Phone #	(      )		
Cellular Phone #	(      )		
Marital Status	<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Other (please specify)		
Date of Birth (used by the Temple for census only) – mm/dd/yy			

**Mailing Address Information**

Street Address			
City			
State		Zip Code	

**Spouse / Partner Information**

	<b>First Name</b>	<b>Middle Name/Initial</b>	<b>Last Name</b>
<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Dr.			
Occupation			
Email Address			
<i>The Temple has a weekly e-mail newsletter regarding important events or news. You will receive this weekly e-mail unless you opt out by checking this box.</i>			<input type="checkbox"/> Opt-out
Home Phone #	(      )		
Cellular Phone #	(      )		
Date of Birth (used by the Temple for census only) – mm/dd/yy			

**Dependent Children Information** (under the age of 19 or a student at a college/university – No dues if a dependent)

First Name	Middle Name/Initial	Last Name	Date of Birth (mm/dd/yy)

The Temple's fiscal year runs from Dec. 1<sup>st</sup> through Nov. 30<sup>th</sup> of the subsequent year. The minimum dues amount needs to be received by **September 30<sup>th</sup>** to be considered as a "Regular" member of the Temple for the current fiscal year. Please make checks payable to "**Seattle Buddhist Church**" and can be dropped off or mailed to the following address:

**Seattle Betsuin Buddhist Temple, 1427 S Main Street, Seattle WA 98144-2034**

Payment by credit card is currently accepted. Please go to [www.seattlebetsuin.com](http://www.seattlebetsuin.com) and the link is at the bottom of the home page. Thank you for your membership contribution to the Temple.