

## Membership Application

Signature

**Email List** 

Receipt

Spreadsheet

Part A - Personal Details (Please Print)	Part C- Membership Type
Family Name:	Please tick one membership type:
	Renewal of Membership Associate / Full Member [please circle one]
Given Name:	
	Applicant's Signature
Suburb:	Date:
Postcode:	Associate Membership (New)
	This type of membership is open to all who
Phone:	wish to participate but who do not wish to tak
Email:	refuge in the Triple Gem. Associate members do not have voting
De verrouisk te gestive en op ak aut the en siet ouis	rights and are ineligible to be office bearers of th
Do you wish to receive news about the society via email?	society.
	Applicant's Signature
Do you have any skills you may wish to contribute to the	Date:
society (please specify):	Full Membership (New)
	This is open to practicing Buddhists who have
	taken refuge in the Buddha, the Dhamma, and
	the Sangha and who undertake the Five Precepts
	I wish to attempt to live according to the three
	Refuges and the Five Precepts and so desire
Part B- Annual Donation	admission as a full member of the Society.
Please tick ONE:	A. B. W. O.
Individual \$30 Child/ Unwaged \$0	Applicant's Signature
Crima, Criwagea 40	Date:
Family \$40 Other \$	Full membership is subject to endorsement by th
	Spiritual Adviser.
How many years of membership would you like to apply	Spiritual Adviser's
for?	, and the second
	Signature
1 year Other	
Payments -	Date:
·	
Cash: Receipt Number :	
Direct Debit: Please put "MEMBERSHIP BSSA"	
into the reference field of your deposit.	
BSB: 633-000 (Bendigo Bank)	Office Use Only
A/C no: 1605 13 859	Rec'd \$
Name: Buddhist Society of South Australia	

**Cheque or postal order:** 79 Davis ave, Christies Beach, SA 5165