

# SOUTHERN ALAMEDA COUNTY BUDDHIST CHURCH "NEW" MEMBERSHIP REGISTRATION



**Instructions:**

1. Include dependents living away from home.
2. Mark current and desired church affiliations.
3. Please type or print legibly.

\_\_\_\_\_  
(Family Name)

\_\_\_\_\_  
(Home Phone) (Cell Phone – Optional)

\_\_\_\_\_  
(Mailing Address)

\_\_\_\_\_  
(E-mail)

\_\_\_\_\_  
(City, State, Zip)

\_\_\_\_\_  
(Fax/Business Phone)

| Full Name | Relationship<br>(H,W,S,D) | Birth-Date | Occupation | Church | BWA | Dharma<br>School | Jr.<br>Y.B.A. | Living<br>Away | Non-<br>Buddhist |
|-----------|---------------------------|------------|------------|--------|-----|------------------|---------------|----------------|------------------|
| 1)        |                           |            |            |        |     |                  |               |                |                  |
| 2)        |                           |            |            |        |     |                  |               |                |                  |
| 3)        |                           |            |            |        |     |                  |               |                |                  |
| 4)        |                           |            |            |        |     |                  |               |                |                  |
| 5)        |                           |            |            |        |     |                  |               |                |                  |
| 6)        |                           |            |            |        |     |                  |               |                |                  |

**Pledge Payment Options:**

(Suggested pledges are in **bold**)

Per Member Pledge Options

Quarterly (Jan/Apr/Jul/Oct): \$45    **\$60**    **\$75**    \$90    \$120    \$150  
 Semi-Annual (Jan/July):        \$90    **\$120**    **\$150**    \$180    \$240    \$300  
 Annually (Jan):                    \$180    **\$240**    **\$300**    \$360    \$480    \$600

**(Please circle one to indicate your pledge payment plan)**

(No pledge required for children under 21 living at home)

**Please make checks payable to:**

SACBC  
 32975 Alvarado-Niles Road  
 Union City, CA 94587  
 (510) 471-2581 (office)  
 (510) 489-3556 (fax)  
 E-mail: sacbc@sbcglobal.net

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Membership Effective Date)

\_\_\_\_\_  
(SACBC Membership Representative)