

INDIVIDUAL

1st Name _____ MI _____ Surname _____

ONE

Under age 30 First time member age 30 or older **\$150**

Renewing/Returning member age 30 or older **\$250**

FAMILY: 1 or 2 adults + child(ren) under 27 If **PREMIUM** category & amount below instead of **\$400**

Adult 1

1st Name _____ MI _____ Surname _____

Adult 2

1st Name _____ MI _____ Surname _____

Child 1

1st Name _____ MI _____ Surname _____

Child 2

1st Name _____ MI _____ Surname _____

here if using back of form for additional child(ren)'s name(s)

PREMIUM MEMBERSHIP

If **FAMILY**, list **ALL** family members' names above

1st Name _____ MI _____ Surname _____

Category (ONE)

SUPPORTING

\$500

SUSTAINING

\$650

CENTENNIAL
(minimum \$800)

\$

\$

FRIEND of BTC (Minimum \$75, non-voting)

1st Name _____ MI _____ Surname _____ **\$**

Member

Address _____ Unit # _____

City _____ State _____ Zip _____ plus 4 (optional)

Member

Member

Landline # _____ Cell Phone # _____

Member

Email _____

Do not publish phone number

Do not publish email address

Mail form & check to **Membership • Buddhist Temple of Chicago • 1151 W. Leland • Chicago, IL 60640** **\$**

(Secure web form available to pay by credit or debit card at www.BuddhistTempleChicago.org/membership)

OR here and mail this form to charge to:

Credit or

Debit Card # _____ Expires _____ / _____ CVV _____ **\$**

Cardholder

Cardholder

Name _____ Signature _____

here if cardholder name, address, phone # or email differs from member. Fill in spaces below with cardholder info.

Cardholder

Address _____ Unit # _____

City _____ State _____ Zip _____ plus 4 (optional)

Cardholder

Cardholder

Landline # _____ Cell Phone # _____

Cardholder _____