

## Application to become a Member of Jikishoan Com #218 13.09.2016

Please print clearly							
Given Name:			Fa	mily	Name:		
Street:			Suk	Suburb:			
State: Postcode:			Em	Email:			
Phone (home):			Мс	Mobile:			
Date of Birth:							
I wish to become a Mem	ber of Jikishoan.	I have read, and	fully su	pport, the A	Aims and Obje	ectives of Jikishoan.	
I have participated in the following Jikishoan activities:							
<ul> <li>Integrated Buddhist Stu</li> </ul>	udies – Main Cou	rse A					
-	Class A1	[Sat 9–11 am]		Year/Mont	h		
	Class A2	[Sat 5.00-7.00 p	m]	Year/Mont			
	Class A3	[Wed 7–9 pm]		Year/Mont	h		
<ul> <li>Integrated Buddhis</li> </ul>							
	Sunday: No. of occasions Thursday: No. of occasions						
<ul> <li>Integrated Buddhist Studies – Main Course C – Year</li> </ul>							
<ul> <li>Jikishoan activities:</li> </ul>							
	Sanzen-kai:	Sunday:	No. of	occasions			
	Thursday: No One Day Workshop [Date/s] Picnic [Year] Retreat/s [Month + Year]		No. of	occasions			
DOTHER	-	-					
I have had a personal interview with a Jikishoan Committee Member to discuss my interest in becoming a member and my support for the Aims and Objectives of the community.							
Committee member's no	ame:			Date	e of interview:		
If my application is successful, I agree to abide by the Jikishoan Rules of Incorporation (available on the							
Membership page at <a href="https://www.jikishoan.org.au/membership">www.jikishoan.org.au/membership</a> ) and consent to support the safety and well-being of							
everyone, practising right conduct, non-harming and the cultivation of virtue.							
If my application is successful, I acknowledge that I may be photographed by Jikishoan photographers at scheduled Jikishoan events, with some of these photos being reproduced in Myoju and/or the Jikishoan website. If I do not wish to be photographed, I will indicate this at the time.							
If my application is successful, I agree to my name being published in Myoju. !Yes !No							
Accompanying this application is a photograph of myself, which is to be used by the Jikishoan Management Committee for administration purposes only.							
Applicant signature:		•			Date:		
Committee member sign							
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Please hand the completed form to the Committee Member or post it to the address above. Do not include payment with the form. You will be advised of the outcome of your application and will be invited to pay the applicable subscription amount.							

Jikishoan Zen Buddhist Community Incorporated Registration A0037927K ABN 15 890 129 251