



國際佛光會達拉斯青年分團 入團表格
 Buddha's Light International Association Young Adult Division,
 Dallas Subdivision Membership Registration Form

Last Name: _____ First Name: _____		Date 日期: _____
姓名: _____		Gender: <input type="checkbox"/> Male 男 性別: <input type="checkbox"/> Female 女
Address : Street: _____ 住址: City: _____ State: _____ Zip code: _____		Birthday: / / 生日: mm dd yy
Contact Number 聯絡電話:		
Home (住家): _____		Work (工作): _____
Cell (手機): _____		Email (電郵): _____
Occupation (職業)	Education/Grade Level (學歷)	
Skills/Extra Curricular/Hobby (專長/嗜好)		

Office use only:		
Membership year: 2008 <input type="checkbox"/> 2009 <input type="checkbox"/> 2010 <input type="checkbox"/>		
會員號碼 Member ID: _____		
Payment: <input type="checkbox"/> Cash	<input type="checkbox"/> Check No: _____	Amount: _____
Date: _____		
Received By: _____		