



Member No: £

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MAHAMEVNAWA BUDDHIST MONASTERY OF PERTH

82 Broadhurst Road, Martin, WA 6110

APPLICATION FOR YEARLY DONOR

Mr/Mrs/Miss	First Name:
Last Name:	

Address:	
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Mobile/Home Phone:	
Email Address:	

I would like to make a Monthly Contribution of: \$			
Direct Debit		Cash	
		Cheque/Other	

Preferred Monthly Donation Dates for special occasions (E.g. birthday):	
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Narration of the Punya anumodanawa for above occurrences/ purposes:

In the event of any admission as a member, I agree to be bound by the rules of the Mahamevnawa Buddhist Monastery of Perth for the time being in force.

Signature:

Date:

Office use only:

Approved by:

Membership No

Signature:

Date: