## **Buddhist Council of New South Wales Inc**

Membership Application Form

Return completed form by email to <a href="mailto:office@buddhistcouncil.org">office@buddhistcouncil.org</a> or post to Buddhist Council of New South Wales – PO Box 593 Crows Nest NSW 2065

The Organisation	
Name of Temple/Group/Organisation	
Buddhist Tradition or School	
Spiritual Teacher (world-wide)	Spiritual Teacher (within Australia)
Culture / ethnic background	Languages spoken
Address and electronic contact details (Please note that membership is only open to Buddhist temples/groups/organisations operating in NSW & ACT)	
Street address	Suburb Postcode
Mailing Address (if different to street address)	
Email of your temple/group/organisation:	
Facebook:	
Website	
Australian Business Number (ABN) if any:	
Key people in your organisation	
Main Contact Name     (eg. President, Vice President or Secretary)	Administrative (Second) Contact (eg. Office manager, Public Officer, etc)
Title, role or position	Title, role or position
Contact Phone/Mobile	Contact Phone/Mobile
Email:	Email:
How many members do you have in your temple/group/organisation (approximate)?	
Do you have any branches of your organisation in other locations? If so, what are the names and locations of your branches?	

Description of your organisation  (eg. your temple/group/organisation's purpose, aims, objects and it's connection to Buddhism, etc)	
Activities of your organisation	
Main activities (eg. teachings, prayers, meditation, festivals, other)	
Nomination by a Member of Buddhist Council of NSW	
Our Constitution requires new members to be nominated by an existing member of the Buddhist Council of NSW. You can find a list of our members on our website at <a href="https://www.buddhistcouncil.org/find-a-buddhist-centre/">https://www.buddhistcouncil.org/find-a-buddhist-centre/</a> and ask them to nominate your organisation by completing and signing this section of this application form.	
Organisation Name  Name of authorised person	
Signature Date	
Documents to be provided	
☐ Copy of your Constitution or governing documents that contains your organisation's vision, aims and connection to Buddhism	
☐ Copy of your certificate of incorporation (if any)	
If you are not incorporated or do not have a Constitution, please provide below:	
Your organisation's vision, aims:	
Date of your organisation's incorporation, or intended incorporation	

## **E-Newsletter Subscription Consent** By submitting this application, we consent to receiving the Buddhist Council of NSW's e-newsletter and other communications via email. We understand that we can unsubscribe at any time. **Membership Joining Fee** ☐ One-Off Joining Fee \$30 ☐ Seedling (Small Organisations) - \$55 ☐ Budding (Medium Organisations) - \$150 ☐ Blossoming (Organisations with a turnover of more than \$250,000) - \$300 ☐ Additional Donation: \$ ☐ Subsidy (by negotiation for organisations that cannot afford the fees) Total \$ \_\_\_\_\_ **Payment of Membership Joining Fee Direct Deposit** Bank: St George **Buddhist Council of NSW** Account Name: BSB: 112 879 Account Number: 127 240 255 Payment date: Payment reference: (eg.name of your organisation or bank reference number) By Cheque Please make cheque payable to "Buddhist Council of NSW" **Signature by Authorised Person** authority to sign this application form on behalf of the temple/group/organisation named above and the information provided on this application form is true and correct. Signature Date Approved Date Member number

(office use only)

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