South Shore Buddhist Meditation Society Membership Application

Name (red	q'd)
Address (req'd)
- Occupation	on (rea'd)
	——————————————————————————————————————
Phone _	
Email _	
Please advi	ise us of any changes to your contact information!
Membersl	hip Type – check one
	Pillar (\$693/year or \$57.75/month)
	Core (\$252/year or \$21/month)
	Associate (\$63/year)
Men	nbership dues may be paid by:
	cash – drop in MBMC donation bin with this form
	cheque – payable to: South Shore Buddhist Meditation Society
	drop in MBMC donation bin with this form, or
	mail to: Mahone Bay Meditation Centre
	45 School Street, Box 489 Mahone Bay, NS, B0J 2E0
	email – bank transfer to: mbmc2019@gmail.com , recipient:
	South Shore Buddhist Meditation Society
Signature	Date
] I would	like to help with special events and programs
] I would	like to contribute to the operation of the Centre in some of these areas:
	publicity hospitality centre maintenance time keeping web updates other:
Questions?	Email: welcome@mahonebaymeditation.ca
	(Office use only) Renewals: 24 25 26 27 28 29