** MAHAMEVNAWA BUDDHIST MONASTERY  WINNIPEG**

**Membership No**

**1707 Chancellor Dr., Winnipeg, R3Y 4B8**

**Tel: 204-691 5675**

www.mahamevnawawinnipeg.org

*![C:\Users\jgunaratne\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.IE5\G8FYV498\200px-Gmail_Icon[1].png]()* mahamevnawa.winnipeg@gmail.com ![C:\Users\jgunaratne\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.IE5\G8FYV498\Fb-20vy1tx[1].png]() Mahamevnawa Buddhist Monastery, Winnipeg

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| --- |
| Personal Information |
| **Mr./Ms.**  | **First Name:** |
| Middle Name(s): |
| **Last Name:** |
| Spouse Name / Company Name: |
| ***Current Address*** |
| **Street No:** | Apartment No: |
| **Street Name:**  |
| **City:** | **Province:** | **Postal Code:** |
| ***Telephone / Email*** |
| **Tel (Home):** (  ) | **Tel (Mobile/Other)**: (  )  |
| **E-mail:**  |
| Proposer Information (optional) |
| Mr./Ms. | First Name: | Last Name: |
| Membership No: |
| *I hereby certify nominated the applicant, who is personally known to me, for membership of the Association.* |
| Signature of Proposer: | Date: **YYYY / MM / DD** |
| Applicant Signature |
| **Signature of Applicant:** | **Date:**  **YYYY / MM / DD** |
|  |

 **Application for Free Membership**

|  |
| --- |
| Office Use Only |
| Reviewed By: | Date Received | Reviewed: **YYYY / MM / DD** |
| **Approved By:** | **Membership No:** |
| **Signature of Approver:** | **Date:**  **YYYY / MM / DD** |
| **MBAT-MF-V6.0** |