KADAMPA MEDITATION CENTER NYC

MEMBERSHIP APPLICATION

MEMBERSHIP AGREEMENT

As a member of KMC NYC, I understand and agree to the Membership Guidelines outlined below.

MEMBERSHIP GUIDELINES

- Monthly contribution of $85 automatically charged to my credit card*
- 12 month annual commitment requested (renewal is assumed unless we hear from you)
- Membership is effective automatically (partial month will be prorated)
- Charges generally post to your credit card account on the fifth day of each month
- Cash and checks are not accepted for membership payments

*Please remember to notify us if there are changes to your credit card information at any time.

In addition to my membership, I would like to donate $ _____ to KMC NYC monthly.

I would like more information about volunteering with KMC: ☐ Yes ☐ No

Are you approved for a Study Program? If so, check the appropriate box below:

☐ Monday Foundation Program ☐ Wednesday Foundation Program ☐ Thursday Study Program

☐ Teacher Training Program ☐ Correspondence Study Program

CONTACT INFORMATION

First Name: Last Name:

Home Phone: Cell Phone: Work Phone:

Email:

Address:

City: State: Zip:

CREDIT CARD INFORMATION

☐ MasterCard ☐ Visa ☐ American Express ☐ Discover

Credit Card Number ☐☐☐☐ ☐☐☐☐ ☐☐☐☐ ☐☐☐☐

Expiration Date ☐☐/☐☐

Signature: _____ Date: _____

THANK YOU FOR BECOMING A MEMBER OF KMC NYC!

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FOR TREASURY DEPT. USE ONLY

Membership Begins (Month/Day/Year): ☐☐/☐☐/☐☐ Processed By: _____