

Membership Application Form

Please fill out the reverse of this page and mail it to

GBZC 552 Massachusetts Ave, #208 Cambridge, MA 02139

or scan and email it to membershiplist@bostonzen.org

Once your application is approved by the board, and your first payment is received, we will send you a letter confirming your membership.

The amount of your pledge is up to you. GBZC values the intention behind your gift and is grateful for your pledge *in any amount*. If you would like a guideline, GBZC relies on an average of \$50/month from each member in order to meet its current operating expenses. Recognizing that this is more than many members can afford, if you have the capacity to make a larger pledge, we encourage you to be as generous as possible. Your monthly gift of \$75, \$150, or more can make it possible for GBZC to continue to serve everyone, without regard to financial circumstances.

The preferred payment method is to set up a monthly recurring payment via Paypal, by going to https://bostonzen.org/membership-pledge/. However, enclosing a check for annual dues with this application or choosing another way of pledging (see https://bostonzen.org/membership-b1/) are also fine.

Welcome!

Greater Boston Zen Center

Membership Application Form

NAME			
EMAIL			
CITY	STATE	ZIP CODE	
PHONE			
PRIMARY SITTING GROUP (Day, time, location))		
PRACTICE LEADER			
, ,	d up for the GBZC Newsl ou can sign up at http://b		•
May we include yo Yes No	our contact information in	the GBC Commun	ity Directory?
•	elcome your membership sits? Yes No	o, using your name	, in the GBZC
PLEDGE AMOUNT	Monthl	y Annually	(Choose One)
APPLICANT		n	ATE