



2020 年歐洲佛光山傳授在家五戒菩薩戒戒會報名表

2020 Fo Guang Shan European Five Precepts & Bodhisattva Precepts Retreat Application Form

編號 Serial No. :

日期 Date : D/ M/ Y/

姓名 (中文) Name(in Chinese)	姓名 (外文) Name (in English)	性別 Gender	<input type="checkbox"/> 男 M <input type="checkbox"/> 女 F
出生日期 Date of Birth (日/月/年D/M/Y)	國籍 Nationality	身高 Height cm	體重 Weight kg
學經歷 Academic Achievement & Experiences	專長 Skills	服務機關 Company Served	
電話 Telephone	(住家/Res.) (手機/Mobile)	傳真 Fax	職業 Occupation
通訊處 Corresponding Address	Email :		
求受戒因緣 Relationship with Buddhism			
報名類別 : Types of ceremony to be taken (Please tick)	皈依師長德號 Refuge Master	上 下 法師	證件照片二張 (請在照片背面註明 姓名, 請浮貼一張)
<input type="checkbox"/> 皈依三寶 Taking Refuge in the Triple Gem	皈依法名 Dharma Name	(未皈依者免填 - Not necessary to fill if you have not taken Refuge yet)	2 Passport size photos Please write your name on the back of the Photos
<input type="checkbox"/> 五戒 Taking Five Precepts <input type="checkbox"/> 1. 複戒 Renewal of Precepts <input type="checkbox"/> 2. 新戒 New Applicant	受戒日期 Refuge Date		
<input type="checkbox"/> 菩薩戒 Taking Bodhisattva Precepts <input type="checkbox"/> 1. 複戒 Renewal of Precepts <input type="checkbox"/> 2. 新戒 New Applicant	受戒地點 Place of Refuge		
纓衣 Do you have a Manyi (Precept Robe) <input type="checkbox"/> 有 Yes <input type="checkbox"/> 無 No			
1. 常親近的道場 Local Branch Temple	主要使用語言(請勾選一項) Main Language Used (tick one only) <input type="checkbox"/> 中文 Chinese <input type="checkbox"/> 英文 English (<input type="checkbox"/> 能聽 listening <input type="checkbox"/> 能讀 reading <input type="checkbox"/> 能寫 writing)		
2. 學佛時間 Years of experience in Buddhism	<input type="checkbox"/> 一年以上 1+ yr <input type="checkbox"/> 五年以上 5+ yrs <input type="checkbox"/> 十年以上 10+ yrs <input type="checkbox"/> 其它 Others		
3. 您是 : You are	<input type="checkbox"/> 佛光會員 BLIA member <input type="checkbox"/> 會長 Chairman <input type="checkbox"/> 督導 Elder Advisor <input type="checkbox"/> 理事/監事 Committee members <input type="checkbox"/> 功德主 Benefactors <input type="checkbox"/> 道場義工 Volunteer <input type="checkbox"/> 一般信徒 Devotee <input type="checkbox"/> 其他 Others		
同意條款 Terms of agreement 本人了解並同意佛光山寺及派下各單位得將本人所填寫的個人資料蒐集、處理、使用在功德徵信、法會、活動及未來各項活動通知、帳務處理與功德主提報等作業。且本人提供予道場之資料若包含本人以外之個人資料時, 本人已以適當方式使該人等知悉其個人資料會提供予佛光山寺派下相關單位, 進行蒐集、處理或利用。 I understand and agree that Fo Guang Shan monastery and its subunits will collect and store my personal information that I provided, and will use it for the purposes of donations auditing, Dharma services, events, notification of future events, accounting management, reporting of benefactors, and so on. If I have provided another individual's personal information to the monastery, I have informed that individual with an appropriate method that his/her personal information will be collected, stored and used by Fo Guang Shan monastery and its subunits.		簽名 Signature :	日期 Date:
簽名 Signature: _____		受理單位填寫 For Official Use Only	
		受理單位/ 審核意見 Branch Temple /Comments	

※ 請以正楷字體填寫完整及清楚, 以利後續作業, 阿彌陀佛!
 ※ Due to prompt Processing, please complete the Form with **block letter!**