



Drogmi Buddhist Institute

PO Box 388, Strathfield, NSW 2135 Australia
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Membership Application Form

Title: Mr Ms Mrs Miss Venerable Other _____

First name: _____ Surname: _____

Address: _____

City/suburb: _____

Postcode: _____ State: _____ Country: _____

Telephone number: (home) _____

(mobile) _____ (work) _____

Email address: _____

Please tick (✓)

I would like to become a new member of Drogmi Buddhist Institute Inc. and agree to follow the rules of the association of Drogmi Buddhist Institute (annual membership* fee \$75)

I would like to renew membership of Drogmi Buddhist Institute Inc. (annual membership* fee \$75)

I would like to make a one-off donation to Drogmi Buddhist Institute Inc. (Please specify Aus\$ _____)

I would like to make a regular donation to Drogmi Buddhist Institute Inc.
(Please specify Aus\$ _____ and frequency: _____)

Note: You will need to arrange a periodic payment from your bank. The Drogmi Buddhist Institute bank account details can be provided by the Treasurer of the Committee. Please email info@drogmi.org for further information.

* The membership year commences on 31st March and provides 10% off all teachings and retreats).

I would like to be on the Drogmi Buddhist Institute Inc. email mailing list

Your signature: _____ Date: _____

Payment Details: Please identify the details (e.g. name of event or membership) with all transactions

PayPal – MasterCard and Visa credit card payments can be made online at www.drogmi.org.

Cheque / Money Order enclosed for: Aus\$ _____ (payable to "Drogmi Buddhist Institute")

Cash: (Please do not mail cash) Aus\$ _____

Please return this form to Drogmi Buddhist Institute,
PO Box 388, Strathfield NSW 2135
or email to info@drogmi.org

Thank you for your support

Your contribution will make a lasting benefit to the vision of Khenpo Ngawang Dhamchoe and his efforts in spreading the Dharma and the happiness of all beings