

**Karen Buddhist Dhamma Dhutta Foundation  
Membership Application Form**



Name:

Date of birth:

Address:

Mobile:

Telephone:

E-mail:

Languages: Karen  Burmese  English  Thai

Religion: Buddhist  Christian  Other:

In the event of my admission as a member, I agree to be bound by the rules of the Association for the time being in force.

Signature:  Date:

Office use only

Application seconded by:

Signature:  Date:

Approved:

Not approved:

Please send completed application form to:  
Karen Buddhist Dhamma Dhutta Foundation, 195 Arnold Street, Bendigo VIC 3550