



Toronto Zen Centre  
 33 High Park Gardens  
 Toronto, Ontario M6R 1S8  
 Tel.: (416) 766-3400

## **Trial Membership/Friend of the Centre Application**

Please check only one – Trial Membership, or Friend of the Centre:

### **\_\_\_ Trial Membership**

I would like to explore the weekly practice schedule at the Centre, by making an appointment for an orientation to formal protocol, and then beginning to attend formal sittings.

### **\_\_\_ Friend of the Centre**

At this time I am not interested in exploring formal practice at the Zen Centre. However, please include me in your Sangha e-mails & news bulletins. As a *Friend of the Centre*, I am welcome to attend periodic TZC ceremonies and public events, and would like to help support the work of the Zen Centre with an annual donation of \$ \_\_\_\_\_.

OR: \_\_\_ Please email me your *Friend of the Centre* pledge form with information

**For either category, please fill out the information below:**

Date of Workshop \_\_\_\_\_

Date Application Submitted \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Residential Phone number (with area code) \_\_\_\_\_

Business/Cell Phone number (with area code) \_\_\_\_\_

Preferred email address \_\_\_\_\_

Alternate email address \_\_\_\_\_

### **If you wish to participate in Zen Centre activities:**

Do you have any significant medical problems which might affect your participation in activities at the Toronto Zen Centre? If yes, please explain. (Please note that all medical information is kept confidential.)

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