

Hsi Lai Temple Volunteer Application

佛光山西來寺菩薩義工申請表

| Background and Contact Information 背景及聯絡方式 | | | | | | | | |
|---|------|--------------------------|-----------------|-------|-------------|------|------|--|
| Name 姓 | 名 | English: | | | 中文 | | | |
| Gender 性別 | | □M男 □F女 | | | 照片 Photo | | | |
| D.O.B 生日 | | M / D / Y | | | | | | |
| Marital Status 婚姻 | | □ Single 單身 □ Married 已婚 | | | | | | |
| Education 教育 | | | | (| Occupation | 職業 | | |
| E-Mail Address | | | Language 語言 | | | | | |
| Cell Phone 手機 | | | Home Phone 家庭電話 | | | | | |
| Address 3 | 也址 | | | | | | | |
| Special Skills 興趣及專長 | | | | | | | | |
| Your Interests 興趣 | | | | | | | | |
| Your Skills 專長 | | | | | | | | |
| Availability 可服務時間 | | | | | | | | |
| During which hours are you available for volunteer assignments? | | | | | | | | |
| | MON. | TUE. | WED. | THUR. | FRI. | SAT. | SUN. | |
| | | <u> </u> | 三 | 四 | 五 | 六 | 日 | |
| A.M. | | | | | | | | |
| P.M. | | | | | | | | |
| Referred by 由誰推薦做義工: □ Self 自己想做 □ Friends 朋友 □ Venerable 法師 | | | | | | | | |
| Your reason for volunteering 想做義工的原因: | | | | | | | | |
| Religious Background 宗教背景 | | | | | | | | |
| Temple Regularly Attended 親近道場: | | | | | | | | |
| Refuge/Precepts 戒別: □ N/A 未皈依 □ Refuge 皈依 Dharma Name 皈依法名: | | | | | | | | |
| □ Five Precepts 五戒 □ Bodhisattva Precepts 菩薩戒 | | | | | | | | |
| BLIA Member 國際佛光會員: □ Not a Member 非會員 | | | | | | | | |
| □ Member 會員 Subchapter 所屬分會: | | | | | | | | |

| □ In good health 一切良好 □ Back/Hip Pain 腰背痛 □ Diabetes 糖尿病 □ Others 其他 Current Medications 目前服用藥物 Emergency Contact Name 緊急聯絡人-姓名 Relationship | | | | | |
|---|--|--|--|--|--|
| 目前服用藥物 Emergency Contact Name 緊急聯絡人-姓名 Relationship | | | | | |
| 緊急聯絡人-姓名 Relationship | | | | | |
| · | | | | | |
| 緊急聯絡-關係 | | | | | |
| Cell Phone Number 緊急聯絡手機 | | | | | |
| Home Phone Number 緊急聯絡電話 | | | | | |
| Agreement and Signature 同意書 | | | | | |
| (1) I hereby submit my personal information to Fo Guang Shan Hsi Lai Temple and permit its use for sending information on temple services and activities and for their records of participation. If submitting on behalf of other individuals, I hereby verify that permission to use their information as specified above has been given by such individuals. 本人了解並同意佛光山西來寺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。且本人提供之本人以外其他個人資料,已以適當方式使該人等知悉及同意其個人資料,會提供予佛光山西來寺進行蒐集、處理或利用。 (2) Hsi Lai Temple Media Policy Agreement: When volunteering at the temple, you may be photographed or captured on pictures and video, which may be used in records or promotion of temple activity on the website or in temple publications. 西來寺媒體政策同意書:做義工期間,可能會拍照或攝錄,用於寺內活動記錄、網頁及刊物中 Yes, I have read, understand, and agree to the Event Participation Agreement in its entirety. | | | | | |
| 是,我已完整閱讀了解,並同意以上兩個協議。 Our Policy 我們的政策 | | | | | |
| (1) It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability. (2) We reserve the right to make any changes without written notice. | | | | | |
| Thank you for completing this application form and for your interest in volunteering with us. | | | | | |
| Name (printed) | | | | | |
| Signature | | | | | |

For Office Use Only 受理單位使用

| Reference 受理單位 | | | | | |
|---|--|--|--|--|--|
| ID No 編號 | | | | | |
| Department 組別 | | | | | |
| Volunteer Orientation Date 新進義工座談會日期 | | | | | |
| Issued Temporary Badge Date 臨時義工證核發日期 | | | | | |
| Issued Permanent Badge Date 正式義工證核發日期 | | | | | |
| Uniform Size 義工制服尺寸 | □S □M □L □XL □XXL □XXXL | | | | |
| Comment /評語 | | | | | |
| Volunteer Orientation Session 西來寺新進義工座談時間 | | | | | |
| □ The fourth Sunday of each month @ 2pm(每個月第四個星期日@ 2pm) Next Session: | | | | | |
| □ The second Sunday of each month @2pm (每個月第二個星期日@2pm) Next Session: | | | | | |
| * | | | | | |
| | willingness to volunteer at Hsi Lai Temple. Please indicate the end the next volunteer orientation session as shown above: | | | | |
| | 菩薩義工」的行列!請您在以上的時間中,勾選可以參加並註明在下方空白處,我們會進一步與您聯繫。 | | | | |
| Date/日期: | | | | | |

Volunteer group 西來寺義工組 (626)961-9697 ext 114 E-mail: learning@ibps.org