



# 德州寶塔禪寺 塔位認供登記表

## Texas Pagoda Chan Monastery – Niche Placement Application

認供日期 Date of Sponsorship (mo/day/year) \_\_\_\_/\_\_\_\_/\_\_\_\_

認供塔位編號 Niche Number : \_\_\_\_\_

認供人 Sponsor	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; border-bottom: 1px solid black;"></td> <td style="width:33%; border-bottom: 1px solid black;"></td> <td style="width:33%; border-bottom: 1px solid black;"></td> </tr> <tr> <td style="text-align: center;">First Name</td> <td style="text-align: center;">Last Name</td> <td style="text-align: center;">中文姓名 / 法名</td> </tr> </table>				First Name	Last Name	中文姓名 / 法名				
First Name	Last Name	中文姓名 / 法名									
認供人編號 Sponsor Number :	Address: _____										
_____	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:40%; border-bottom: 1px solid black;"></td> <td style="width:20%; border-bottom: 1px solid black;"></td> <td style="width:20%; border-bottom: 1px solid black;"></td> <td style="width:10%; border-bottom: 1px solid black;"></td> <td style="width:10%; border-bottom: 1px solid black;"></td> </tr> <tr> <td style="text-align: center;">Street</td> <td style="text-align: center;">City</td> <td style="text-align: center;">State</td> <td style="text-align: center;">Zip</td> <td></td> </tr> </table>						Street	City	State	Zip	
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認供區別 Sponsor Niche Area	認供總金額 Total Amount of Donations US\$: _____ <input type="checkbox"/> 一次圓滿 One-time (日期 ____/____/____) 收款人 Received by: _____ <input type="checkbox"/> 分期 Installments 每月 monthly \$ _____ x _____ 次 times 若因風災、盜竊或是其它不可抗力因素造成骨灰遺失或受損本人同意德州寶塔禪寺不需負責。 I agree to hold the Monastery harmless from loss or damage of urn/ashes caused by hurricane, theft, or other force majeure.								
<input type="checkbox"/> A Rows – 3 ~ 8  <input type="checkbox"/> B Rows – 1,2,9,10	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:70%; border-bottom: 1px solid black;"></td> <td style="width:10%; border-bottom: 1px solid black;"></td> <td style="width:10%; border-bottom: 1px solid black;"></td> <td style="width:10%; border-bottom: 1px solid black;"></td> </tr> <tr> <td style="text-align: center;">認供人簽名 Sponsor's Signature</td> <td style="text-align: center;">(mo/day/year)</td> <td style="text-align: center;">____/____/____</td> <td style="text-align: center;">日期 Date</td> </tr> </table>					認供人簽名 Sponsor's Signature	(mo/day/year)	____/____/____	日期 Date
認供人簽名 Sponsor's Signature	(mo/day/year)	____/____/____	日期 Date						

塔位立位姓名 Name of Niche Beneficiary	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%; border-bottom: 1px solid black;"></td> <td style="width:25%; border-bottom: 1px solid black;"></td> <td style="width:25%; border-bottom: 1px solid black;"></td> <td style="width:25%; border-bottom: 1px solid black;"></td> </tr> <tr> <td style="text-align: center;">First</td> <td style="text-align: center;">Middle</td> <td style="text-align: center;">Last</td> <td style="text-align: center;">中文姓名 / 法名</td> </tr> </table>					First	Middle	Last	中文姓名 / 法名
First	Middle	Last	中文姓名 / 法名						
與認供人關係 Relation with Sponsor:	生日 Date of Birth: ____/____/____ 歿日 Date of Death: ____/____/____ 性別 Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female 入塔日期 Date of Inurnment ____/____/____ 塔位區 Niche Location: _____								

相關文件 (二份) Required Documents (in duplicate)	<input type="checkbox"/> Certified copies of Death Certificate <input type="checkbox"/> Copies of Picture ID for Sponsor/Next of Kin <input type="checkbox"/> Copies of Cremation Permit <input type="checkbox"/> Copies of Burial Transit Permit
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聯絡人/親眷家屬 Contact Person /Next of Kin	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; border-bottom: 1px solid black;"></td> <td style="width:33%; border-bottom: 1px solid black;"></td> <td style="width:33%; border-bottom: 1px solid black;"></td> </tr> <tr> <td style="text-align: center;">First Name</td> <td style="text-align: center;">Last Name</td> <td style="text-align: center;">中文姓名 / 法名</td> </tr> </table>				First Name	Last Name	中文姓名 / 法名				
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與立位人關係 Relationship with the Beneficiary:	Address: _____										
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### 以下免填 For Office Use Only

功德金繳款記錄 Donations Record	繳款於中台分院名稱 Name of the paid-through Chung Tai Branch: _____ 介紹人 Introduced by: _____ 承辦法師 Handled by Dharma Master: _____
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Date		Check No.	Amount	Initials	Date		Check No.	Amount	Initials
1					6				
2					7				
3					8				
4					9				
5					10				

備註 Remarks :
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