



# 多倫多佛光山孝親報恩梁皇法會功德登記表

No. \_\_\_\_\_

聯絡人/捐款人 Contact Name		電話 Tel. (家/Home)	(手提/Mobile)
地址 Address:	房號 Apt. #	街名 Street Address	電子信箱 Email Address
市 City	省 Province	郵遞編號 Postal Code	佛光卡號碼 Fo Guang Card No.

**功德項目：**

☐ 會主頭 \$2,000 (發起人、十供養、消災大祿位、超薦大牌位各五)    ☐ 會主 \$1,200 (發起人、十供養、消災大祿位、超薦大牌位各三)

☐ 壇主 \$600 (發起人、十供養、消災大祿位、超薦大牌位各二)    ☐ 懺主 \$300 (發起人、十供養、消災大祿位、超薦大牌位各一)

☐ 超薦大牌位 \$100    ☐ 超薦小牌位 \$50    ☐ 消災大祿位 \$100    ☐ 消災小祿位 \$50

☐ 將出席法會；出席人數：\_\_\_\_\_ (會主頭1-2人，會主、壇主、懺主1人)    ☐ 不克出席

## 消災祿位 (大祿位可書寫兩位姓名或夫妻名合家，小祿位一位姓名)

功德芳名	功德項目	功德芳名	功德項目	功德芳名	功德項目

## 超薦資料 (稱謂為陽上對亡者的稱呼)

稱謂	亡者姓名	陽上	功德項目	地址 (僅超薦地基主需填寫)

## 功德芳名

發起人 (\$50)					
十供養 (\$50)					
贊普 \$_____ × _____					
供齋 \$_____ × _____					
供花果 \$_____ × _____					

退稅收據 <input type="checkbox"/> 電子版 <input type="checkbox"/> 紙版 <input type="checkbox"/> 退稅為捐款本人 <input type="checkbox"/> 單筆捐款收據 <input type="checkbox"/> 年度捐款收據 ● 退稅收據人名必須和支票人名/電子匯款人名相符	姓 Last Name	名 First Name	
	房號 Apt. #	街名 Street Address	
	市 City	省 Province	郵遞編號 Postal Code

<b>功德款總計 Total Donation \$</b> _____ <input type="checkbox"/> 現金 Cash \$ _____ <input type="checkbox"/> PayPal Giving Fund (www.bit.ly/paypaltoibps) <input type="checkbox"/> 支票 Cheque No. _____ (支票抬頭請寫 Please make cheque payable to <b>I.B.P.S. of Toronto</b> )	<input type="checkbox"/> 信用卡 Credit Card (親臨道場辦理) <input type="checkbox"/> Interac e-Transfer (donation@fgs.ca)	三聯單序號 Reference No. 經手人/日期 Received by/Date
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# Emperor Liang Repentance Service Donation Registration Form

No. \_\_\_\_\_

Contact Name	Tel. (Home)	Cellular
Address: Apt. #	Street Address	Email Address
City	Province	Postal Code
		Fo Guang Card No.

**Donation Items:** ☐ Chief Sponsor \$2,000 (5 per each marked item \*) ☐ Head Sponsor \$1,200 (3 per each marked item \*)  
☐ Bodhi Sponsor \$600 (2 per each marked item \*) ☐ Wisdom Sponsor \$300 (1 per each marked item \*)  
☐ Memorial Plaque (Large) \$100 ☐ Memorial Plaque (Small) \$50 ☐ Blessing Plaque (Large) \$100 ☐ Blessing Plaque (Small) \$50  
☐ Will attend service; No. of attendees : \_\_\_\_\_ (1 or 2 for Chief Sponsor; 1 for other Sponsors) ☐ Will not attend service

## \*Blessing Plaques (Large: Names of two persons OR per couple & family; Small: name of one person only)

Name of Benefactor	Category	Name of Benefactor	Category	Name of Benefactor	Category

## \*Memorial Plaques (Relationship: How the descendent addresses the deceased.)

Name of deceased	Descendent or relative's name	Relationship	Category	Address (For Memorial Plaques for Spirits of Foundation Only)

## Names of Benefactors

*Lead Benefactors (\$50)					
*Ten Offerings (\$50)					
Food Offering \$ _____ × _____					
Meal Offering \$ _____ × _____					
Flower/Fruit Offering \$ _____ × _____					

<input type="checkbox"/> Require an official donation receipt <input type="checkbox"/> Electronic <input type="checkbox"/> Paper <input type="checkbox"/> Same as Donor/contact person above <input type="checkbox"/> One-time donation receipt <input type="checkbox"/> Annual donation receipt <input checked="" type="radio"/> The name on the donation receipt must be the same as the name on the cheque or e-Transfer	Last Name	First Name
	Apt. #	Street Address
	City	Province
		Postal Code

Total Donation \$ _____ <input type="checkbox"/> Cash \$ _____ <input type="checkbox"/> Credit Card (In-person only)	Reference No.
<input type="checkbox"/> PayPal Giving Fund (www.bit.ly/paypaltoibps) <input type="checkbox"/> Interac e-Transfer (donation@fgs.ca)	Received by/Date
<input type="checkbox"/> Cheque No. _____ (Please make cheque payable to I.B.P.S. of Toronto)	