

2026年多倫多佛光山大悲懺法會

龍天聖眾同慈護 百千三昧頓薰修
洗滌塵勞願濟海 所願從心悉圓滿

為慶祝觀世音菩薩聖誕紀念日(農曆2月19日)，多倫多佛光山謹定於2026年3月29日(星期日)，啟建大悲懺法會；禮懺功德回向眾姓檀那消災得福，開本見知，制諸魔外，三業精進。

禮懺功德殊勝，歡迎使用多倫多佛光山官方網站 www.fgs.ca 線上報名；並期屆時參與禮懺(實體/線上)，共霑法喜。

多倫多佛光山 謹啟



多倫多佛光山大悲懺法會功德登記表

捐款人/聯絡人： 中文姓名		Last Name		First Name		電子信箱：			
地址： 房號 Apt. #		街名 Street Address		市 City		省 Province		郵遞編號 Postal Code	
電話：				手機：			佛光卡號碼：		
<input type="checkbox"/> A. 懺主 \$50/一位代表			<input type="checkbox"/> 將出席法會，請穿海青/縵衣			<input type="checkbox"/> 法會後領取結緣品			
			<input type="checkbox"/> 不克出席			<input type="checkbox"/> 不領取結緣品			
懺主芳名		懺主芳名		懺主芳名		懺主芳名			
<input type="checkbox"/> B. 供齋 \$ _____ 功德芳名				<input type="checkbox"/> C. 供花、供果 \$ _____ 功德芳名					
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:			
		地 址 Address		房號、街名、號碼 Apt.# Street Address					
				市 City		省 Province		郵遞編號 Postal Code	
功德款總計：\$ _____		<input type="checkbox"/> 現金 \$ _____		<input type="checkbox"/> 信用卡(只限親自到場辦理)		三聯單序號			
<input type="checkbox"/> PayPal Giving Fund (www.bit.ly/paypaltoibps)		<input type="checkbox"/> Interac e-Transfer (donation@fgs.ca)		經手人/日期					
<input type="checkbox"/> 支票 No. _____ (支票抬頭請寫 I.B.P.S. of Toronto)									

Fo Guang Shan Temple of Toronto Great Compassion Repentance Service



To celebrate the birthday of Avalokitesvara Bodhisattva, Fo Guang Shan Temple of Toronto will hold the Great Compassion Repentance Service on March 29, 2026.

All merits will be transferred to benefactors and participants. Benefits include the merits to eradicate hindrances, purify our body, speech and mind, see our true natures and realize all wisdom.

The service will be live-streamed and everyone is welcome to participate in this wondrous practice of repentance.

For more information, please visit www.fgs.ca

Fo Guang Shan Temple of Toronto
6525 Millcreek Drive, Mississauga, Ontario, L5N 7K6
Tel: (905) 814-0465 | www.fgs.ca | Email: info@fgs.ca



Fo Guang Shan Temple of Toronto Great Compassion Repentance Service Registration Form

Contact Name: Last Name		First Name		Email Address:	
Address: Apt.#		Street Address		City Province Postal Code	
Tel:		Mobile:		Fo Guang Card No.:	
<input type="checkbox"/> A. Patron: \$ 50 Benefactor: One Representative		<input type="checkbox"/> Will attend the Service Please dress in Haiqing /Precept robe <input type="checkbox"/> Will not attend Service		A Blessing Gift Bag (Water of Great Compassion, fruit, treats) comes with your registration. <input type="checkbox"/> No <input type="checkbox"/> Yes - Pick up after service	
Names of Benefactors:		Names of Benefactors:		Names of Benefactors:	
<input type="checkbox"/> B. Food Offering: \$ _____		Names of Benefactors:		<input type="checkbox"/> C. Flower/Fruit Offering: \$ _____	
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 ● 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)		<input type="checkbox"/> Cheque No. _____ (Please make cheque payable to I.B.P.S. of Toronto)		Received by/ Date:	