



ZEN CENTER OF LOS ANGELES / BUDDHA ESSENCE TEMPLE  
923 South Normandie Avenue, Los Angeles, CA 90006-1301  
Tel (213) 387- 2351 ◇ Fax (213) 387-2377 ◇ mail: info@zcla.org

## MEMBERSHIP APPLICATION

### PERSONAL INFORMATION:

1. Name:	2. Sex:
3. Street:	
4. City:	
5. State:	6. Zip Code:
7. Phone (Day): (Eve):	
8. E-mail:	
9. Fax:	
10. Date of Birth:	
11. Marital Status:	
12. Name of Spouse or Partner, if applicable:	
13. Children (Names & Ages):	

### MEMBERSHIP CATEGORY (please check):

#### (A)

- Sustaining** (\$200/month;  
250/family)  
 **Supporting** (\$100/month;  
\$150/family)  
 **Practicing** (*includes Residents*)  
(\$55/month; \$75/family)

#### (B)

- Affiliate** (*includes Students &  
Seniors*) (\$35/month; \$45/family)

#### (C)

- Corresponding** (\$15/month)

### How will you pay (please cross):

- Monthly check  
 Reoccurring Credit Card Transaction  
 Cash

### EMERGENCY CONTACT

Name	
Address	
Phone + email address	
Relationship	

15. Number of Vehicles and Brief Description:

16. Preferred Start Date:

17. Expected Length of Occupancy:

**EDUCATION:**

1. Highest Grade completed:
2. Degrees & University:
3. Languages (fluent):

**WORK EXPERIENCE:**

1. List three most recent, including present work:			
	Job Title	Name of Business	Dates (approx)
2. Other Work Experience:			
3. Hobbies and Special Interests:			
4. Special Skills: <input type="checkbox"/> Cooking <input type="checkbox"/> Gardening <input type="checkbox"/> Computer <input type="checkbox"/> Fundraising <input type="checkbox"/> Business Organization <input type="checkbox"/> medical <input type="checkbox"/> PR <input type="checkbox"/> Disaster Preparation Other:			
5. Do you do volunteer? If yes, where:			

**PRACTICE INFORMATION:**

1. Have you previously had meditation experience?	
What sort?	
2. For how long?	3. Do you still do this practice?
4. Who was your teacher?	
5. Have you ever practiced Zen at a formally established Center or group?	
If so, when? Where?	
Please give us a reference that we may contact, if necessary: (name, address, phone number):	
6. Have you received the precepts (Jukai or tokudo)? <input type="checkbox"/>	
When?	
Where?	
Who is your preceptor?	
7. Have you made a formal commitment to be a student of a Dharma teacher?	
If yes, please give name and contact information of teacher:	

**HEALTH:**

1. How would you rate your general physical health? (Good, Fair, Poor)?			
2. Do you have any specific health problems that we should know about?			
If yes, please explain			
3. How would you rate your general psychological and emotional health?			
4. Have you ever been in psychotherapy?		When?	
5. Have you ever been hospitalized for psychiatric treatment?			
If yes, when& where?			
6. In case of accident or serious illness while at the Zen Center, who should we notify?			
Name	Address	Phone	Relationship

**ZEN CENTER:**

1. How did you hear about the Zen Center of Los Angeles?
2. Have you completed the full Introductory Workshop?

3. What category of membership are you interested in?
4. Why are you interested in becoming a member of this Zen Center?

RELEASE: Members at Zen Center of Los Angeles may find some aspects of the program physically or mentally demanding. The programs do include physical work and vigorous daily schedule. I may freely decline to participate in any work which in my sincere judgment is dangerous to my health. I realize that I may consult with a teacher or senior from the Center to resolve any difficulties I might have. I agree to release and to indemnify Zen Center for any injury to others caused by me.

<b>Date:</b>	<b>Name:</b> <b>I have read and filled out this form (please check)</b> <input type="checkbox"/>
--------------	---

**Procedure after application:**

As soon as your application gets to the office, you will receive a welcome call.

You will have the option to have a Dharma Buddy for four months. The Dharma Buddy will help you ease your entry into the membership community of the Center and try to answer any question you may have. If you choose to have one, you will be contacted by the coordinator to finalize that process and connect you with your Dharma Buddy.

You will also be invited to a New Member Entering Ceremony in the Zendo that usually occurs once a month on a Saturday morning.

The Center will contact you (and you can also contact the Center if you wish) to explain to you how to get access to the Member Section of the Website and give you the passwords. The Member Section offers online Dharma Talks, access to Liturgy and other teaching files and forum for members to communicate and chat directly with each other about welfare and health support for each other.

All new members are required to participate in Tangaryo Day. You will be asked to sign up for one that fits your personal schedule. Traditionally, Tangaryo is an all-day sitting outside the temple gate, performed by practitioners seeking access to the temple. At ZCLA, Tangaryo is taken place in the Zendo. During this day, practice is unstructured: no bells, no teacher. Typically the sitting lasts from 9:00 a.m. to 4:00 p.m., with an hour off for lunch and a tea/discussion to end the day. Silent, informal lunch is provided. The fee is on donation basis.

If any of these provisions do not occur, please contact Gemmon in the office (213) 387 2353 and we will follow through.

Welcome as a new member of ZCLA