

超荐法会表格



Memorial Dharma Assembly Registration Form

请选择您要参加的牌位类别：

Please select the type of memorial tablet preferred.

- A 净土莲位 (可写 8 位往生者姓名加历代祖先) \$1,000
 (limited to 8 deceased + Ancestors of all Generations)
- B 安乐莲位 (可写 6 位往生者姓名加历代祖先) \$500
 (limited to 6 deceased + Ancestors of all Generations)
- C 荐亲莲位 (可写 4 位往生者姓名加历代祖先) \$100
 (limited to 4 deceased + Ancestors of all Generations)

请把往生者姓名和关系辈分填写在表格里。

Please write the names of the deceased and their relationship to you in the boxes provided.

编号 S/N	往生者姓名 Names of the deceased	关系辈分 Relationship to you
1.		
2.		
3.		
4.		
5.		
6.		
8.		
7.		
	门堂上历代祖先 Ancestors of All Generations	阳上： Dedicator:
D	各人累世冤亲眷属 (\$30) Individual Kamic Creditor	阳上： Dedicator:
	无祀婴灵 / 无祀孤魂等众 (\$30) Unknown unborn infants / Unknown beings	阳上： Dedicator:
	随缘供斋 (数额\$) Offerings of Food to Buddhas & Bodhisattvas	姓名： Name:

现金 Cash / 支票 Cheque: \$ _____ 支票号码 Cheque No. _____

All cheques should be crossed and made payable to **Poh Ming Tse Temple**.

支票付款, 请您在支票上画双线并注明 **Poh Ming Tse Temple**。

Name 姓名: _____ Contact 联络号码: _____

Address 地址: _____ Singapore 邮区: _____