



Membership Discontinuance Report Form

Member's Information				For Temple Use Only			
Name of Member	Reporting Person	Reporting Date	Date expected to be effective	Office Staff's Name	Approval & Date	Note on Registration Book	Memo
		Yr. _____ Mon _____ Day _____	Yr. _____ Mon _____ Day _____		Yr. _____ Mon _____ Day _____		

ABT

(Americana Buddhist Temple)

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Phone: (517) 545-7559 Fax: (517) 545-7558

Website: www.abtemple.org

- N.B. 1.If you decide to discontinue your Membership, please inform us by filling in this discontinuance report form and mail or fax to us **two (2) weeks** prior to the date you wish to discontinue.
 2.You only need to fill in the Member's Information section on the left hand side.