

Betsuin 529 College Savings Program Application for 529 Savings Contribution

1. Owner of the 529 Savings Account:			
Last Name	First Name		
Address	City	State	ZIP Code
Phone Number	Email Address		
2. Is the Owner of the 529 Savings Account a current Buddhist Church of Sacramento church member?			
Yes <input type="checkbox"/>		No <input type="checkbox"/>	
3. Is the Owner of the 529 Savings Account a current Adult Buddhist Association member?			
Yes <input type="checkbox"/>		No <input type="checkbox"/>	
4. Beneficiary of the 529 Savings Account:			
Last Name	First Name		
5. Is the Beneficiary of the 529 Savings Account currently a Dharma School Student?			
Yes <input type="checkbox"/>		No <input type="checkbox"/>	
6. Beneficiary's Current Grade Level in School:			
Enter grade level (Pre-School, K-12): _____			
7. Did the owner of the 529 Savings Account or other family member make a "matching contribution" to the account of at least \$100?			
Yes <input type="checkbox"/>		No <input type="checkbox"/>	
8. Transfer Instructions:			
Name of Receiving Institution	Account Title/Registration	Account Number	
Signature of Owner of Account			Date

**Sign and submit application to: Buddhist Church of Sacramento
Attention: ABA
2401 Riverside Boulevard
Sacramento, CA 95818**

For 529 Savings Program Administrator Only	
Date Application Received	Application Reviewed By
Recommendation:	