

NORTHERN CALIFORNIA KOYASAN TEMPLE

1400 U Street Sacramento, CA 95818 (916) 444-0111 info@nckoyasan.org

SHI-CHI-GO-SAN/CHILDREN'S SPECIAL BLESSING SERVICE APPLICATION FORM

If interested in the NC Koyasan's Shi-Chi-Go-San Service on **November 23, 2025** at 1:30pm, please complete this application form and mail to NC Koyasan Temple/Shi-Chi-Go-San, or email to info@nckoyasan.org no later than November 16, 2024. Payment may be made by check payable to NC Koyasan Temple or by PayPal or Venmo through the temple's website at https://www.nckoyasan.org/donate. Add "Shi-Chi-Go-San" on the comment section of your PayPal or Venmo payment. The application fee is \$35.00 per child for members and \$40.00 per child for nonmembers.



Name of Child (Last Name	(First Name)	(Mid	(Middle)	
Date of Birth	Age	Gen	Gender (M/F)	
Name of Child (Last Name)	(First Name)	(Mid	(Middle)	
Date of Birth	Age	Gen	Gender (M/F)	
Name of Parent(s)/Guardian Phone number(s)			ımber(s)	
Street Address		Email Ac	ldress	
City	State	Zip	Code	
FILL OUT FORM ONLINE STATE ONLY: VENIMO PAYRAL	nline! eeded!	DONATE		
OFFICE USE ONLY: VENMO PAYPAL	CHECK#	AMOUNT	DATE	