Light up the Torch of Wisdom

BHN _____- 12

Be. Here. Now.

Mindfulness Retreat at Deer Park Monastery, September 11 – 16, 2012

PLEASE FILL OUT ONE REGISTRATION FORM PER ADDRESS

Last Name: _____ **First Name:** _____ **Gender:** _____ **Age:** _____

Street Address: _____

City: _____ **State:** _____ **ZIP:** _____ **Country:** _____

Daytime Phone: (_____)_____ **Evening Phone:** (_____)_____

FAX: (_____)_____ **Email:** _____

Emergency Contact Person: _____ **Phone:** (_____)_____

- **Couples** will be housed separately in dorm rooms (by gender), if needed to accommodate everyone that wish to stay in a dorm room.
- **Scholarships:** Scholarships are available to those in need. Special considerations for families of three or more, young adults and minorities. Contact us at 760-291-1003 x100 for an application form.
- **Students Discount,** 25 % (18 – 26 yrs) only for tenting.
- For people with **limited mobility or special needs**, please contact us at 760-291-1003 x100 so we may better serve you.
- **Cancellation Policy:**

7 days prior to arrival: no refund;
8-14 days prior to arrival: 50% refunded; 50% cancellation fee;
15-30 days prior to arrival: 75% refunded; 25% cancellation fee;
31 days prior to arrival: 85% refunded; 15% cancellation fee.

***SLIDING SCALE* of $20 increments:**
Your higher-end contribution help people with limited means to attend the retreat.

Total Contribution Per Person for Food, Lodging, and Tuition

	Age	Cost/Person
DORM (6 persons) *(total of 192 beds)*	18 +	$260 - 360
	13-17	$195
	6-12	$130
Tent *(Please bring your own tent)*	18 +	$140 - 240
	13-17	$105
	6-12	$70

Your Contribution go toward covering costs for food, accommodation and facility costs at Deer Park, and toward shared expenses of the tour, such as advertisement and transportation.

Through the use of a sliding scale and the availability of scholarships we wish to offer the opportunity for those who want to attend this retreat to be able to come. Contributions on the high end of the sliding scale and donations to the scholarship fund is supporting this wish and effort – ***Thank You!***

- **No refund of any portion of the registration fee is available for late arrivals or early departures.**

Fill in below for adults or children in your party with your same address

Last name	First name	Age	Gender	Housing Type	Amount
					$
					$
					$

Sub-total due for accommodation:	$
Contribution to our Scholarship Fund: Your generosity makes it possible for those in need to attend this retreat. Donations are tax deductible.	$
Total Due:	$
Please pay in full, if unable please send 50% of full balance to reserve your space. (To keep your space in the retreat, please make full contribution by August 31, 2010 at the latest.) **Amount Enclosed:**	$
Balance due:	$

Method of Payment: □ **Check** □ **Money Order** □ **Master Card** □ **VISA** □ **Am Exp** □ **Discover**

Credit Card #:	**Exp. Date (mo / yr):**	**Cardholder's name:**
Cardholder's Authorizing Signature:	**Billing Address of Credit Card** (required by Bank for credit processing): **ZIP:**	

Dharma Sharing Groups

Sharing groups will be arranged according to geographic regions, so you can connect with other practitioners who live near you.
This will support all of us in connecting with others who we might be able to continue our practice with after the retreat.
During the retreat there will be an opportunity to come together with shared affinity, for example: young adults, educators...

To help us better organize the retreat, please answer the questions below:

- Have you attended a retreat with us before? □ Yes □ No If yes, how many? _____ Most recent retreat, when?_____

□ Yes, I have formally received the *Five Mindfulness Trainings*; my Dharma name is _____
□ Yes, I have formally received the *Fourteen Mindfulness Trainings*; my Dharma name is _____
□ I have been connected with the _____ Sangha/Practice Community for _____ months/years
□ I am not connected with a Sangha, but the length and description of my meditation/practice experience is:_____

- My interests, thoughts and/or questions concerning the practice of mindfulness and the theme of this retreat are:

_____

- How did you hear about this retreat?

□ Deer Park Website □ E-mail from Retreat Organizers □ Facebook

□ The Mindfulness Bell □ from a friend □ Sangha Meeting □ Magazine: Which one?_____

□ Other advertisement (specify type) _____

- *Any medical situation we should know about?* Should you have any functional or medical disabilities; recent surgery or inpatient stay at an institution; require medical or psychiatric resources; regularly take any controlled/prescription medications, please contact our Retreat Registrar, (760) 291-1003 ext 100, so we may better serve you.

Liability waiver: The following signatures indicate that participants relieve Deer Park Monastery from all liabilities in the event of any injury or illness incurred while visiting Deer Park.

Date _____/____/_____ Signed: _____ Date _____/____/_____ Signed: _____

In Case of Emergency: Contact name: _____ Phone: ( ) _____

Date _____/____/_____ Signed: _____ Date _____/____/_____ Signed: _____

In Case of Emergency: Contact name: _____ Phone: ( ) _____

Registration & Method of Payment:

Please mail at least 50% of total contribution due to hold your space with your registration form. Please make full contribution by August 31, 2012 at the latest. We ask everyone to make check payable to **Unified Buddhist Church**. As we do not reserve accommodations without payment (at least 50 %), please do **not** fax your registration form, unless you provide us with your credit card information (see above).

To pay by credit card, you may also register online, using our secure server at www.deerparkmonastery.org. Please do not send cash.

Please send completed form and contribution to: *Deer Park Monastery, Be. Here. Now., 2499 Melru Lane, Escondido, CA 92026-8447; FAX it to (760) 291-1010; E-Mail it to deerpark@dpmail.net; or register online at www.deerparkmonastery.org* .

FOR OFFICE USE ONLY **Total Due: $_____**

Received: ___/___/___ (Signed) _____ Confirmation Sent: ____/__/___ □ E-mail _____ □ US Mail_____

Date___/___/___ □ **Money Order** □ **Master Card** □ **VISA** □ **AMEX** □ **Discover** $

Date___/___/___ Check # _____ Bank _____ _____ $

Date___/___/___ Cash (Signature) _____ Date _____ _____ $

Balance Due: $_____

Last updated July 31, 2012