**Retreat Registration Information**

Spring Meditation Retreat:

**There’s More than One Way to Skin an Ego: The Multiplicity of Meditations**

with Santikaro

Sunday, March 31, 2019, 3:00 PM to

Wednesday, April 3, 2019, 1:00 PM (3 nights)

Sponsored by Dharma Zephyr Insight Meditation Community

[http://dharmazephyr.org/](http://dharmazephyr.org/event/residential-retreat-with-santikaro/)

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| **TO REGISTER:**1. **Please mail:**
2. **This Registration Form, pages 3-6, filled out;**
3. **Signed Liability Waiver, pages 6-7; and**
4. **$100 deposit, payable to Dharma Zephyr (or the total fee if registering after February 17, 2019).**

**To:** **DZIMC****1835 Franklin Rd.****Carson City, NV 89706**1. **Alternatively, you may register and pay online at:** [**http://dharmazephyr.org/event/residential-retreat-with-santikaro/**](http://dharmazephyr.org/event/residential-retreat-with-santikaro/)
2. **Remit balance of registration fee by February 17, 2019 (or your total fee if registering after February 17, 2019).**
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**COST:** 3 nights for $250 - $410 sliding scale, plus a voluntary donation to the teacher at the end of the retreat. The estimated actual per-person cost for this retreat (if we used a fixed rate) is $310 for 3 nights. By selecting an amount above these levels, your generosity supports those who need to select a lower rate to attend the retreat. This sliding scale allows some scholarship needs to be handled by self-selecting an amount lower than $310; however, additional scholarships are available too – contact tom@dharmazephyr.org for more information. The cost includes comfortable accommodation in a shared cabin, three delicious vegetarian meals each day, and staff services. Depending on attendance, a limited number of single-occupancy rooms may be available upon request for $150 extra. Single-room requests will be confirmed in late-March, 2019. Early registration is much appreciated as it assists in retreat planning.

A minimum $100 deposit is required to secure your spot. The remaining balance is due by February 17, 2019, unless you are registering after February 17, 2019, in which case your full fee is due upon registration. Please make checks out to: Dharma Zephyr.

Compensation for the teacher is not included in the registration fee. There will be an opportunity at the end of the retreat to offer dana/donations to support the teacher and his ongoing efforts of serving the dhamma.

**CANCELLATION:** The $100 deposit is non-refundable. Cancellation by February 17, 2019: full refund except deposit. Cancellation between February 17, 2019 and March 10, 2019: one half of all payments except deposit. Cancellation after March 10, 2019: no refund.

**LOCATION:**  Galilee Episcopal Camp and Conference Center, Glenbrook, Nevada, on highway US 50 on the east shore of Lake Tahoe. Directions are available at:

<http://dharmazephyr.org/event/residential-retreat-with-santikaro/>

**DATES & TIMES:** The retreat begins at 3 pm, Sunday, March 31, 2019. Please plan to arrive between 1:00 and 2:00 pm to check in and settle into your room. The retreat will end at 1:00 pm, Wednesday, April 3 (after lunch).

**GENERAL INFORMATION:** The weather can be quite variable, and stunningly beautiful, in early April at Lake Tahoe (elevation 6,200 ft.) – from sunny 60’s to stormy 30’s. The cabins, dining hall, and meditation hall are all heated to ensure your comfort. Bring a selection of clothing to keep yourself comfortable while experiencing the impermanence of nature.

Weather permitting, sit-on-top kayaks will be available during walking meditation periods. Portions of previous April retreats have been warm and calm – perfect for meditative kayaking. If interested, bring an extra set of clothing that can get wet (e.g., water shoes, swim suit, and non-cotton pants and shirt).

**QUESTIONS?** Contact Karen Kvasnicka at karen@dharmazephyr.org or at (775) 267-2424.

**PLEASE PRINT AND FILL OUT THE REGISTRATION FORM AND LIABILITY WAIVER ON THE FOLLOWING PAGES, AND MAIL TO: DZIMC, 1835 FRANKLIN RD, CARSON CITY, NV 89706 WITH YOUR REGISTRATION FEE,**

**OR REGISTER AND PAY ONLINE AT** [**http://dharmazephyr.org/event/residential-retreat-with-santikaro/**](http://dharmazephyr.org/event/residential-retreat-with-santikaro/)**.**

**REGISTRATION FORM**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dates attending: 3/31/2019 – 4/3/2019.

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Occupation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Age: \_\_\_\_\_\_\_\_\_\_\_

How did you learn about this retreat? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship to emergency contact: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Retreat Experience:** Is this your first residential retreat? Yes \_\_\_\_\_ No \_\_\_\_\_

#### Accommodations

**Note:** If possible, participants must provide their own bedding (including sheets and blankets, or sleeping bags), pillows, towels, and toiletries. If you are flying and cannot bring bedding, please contact Karen Kvasnicka to request use of Camp Galilee’s limited bedding.

Do you identify as? Male \_\_\_\_\_ Female \_\_\_\_\_

Do you snore? Yes \_\_\_\_\_ No \_\_\_\_\_

**Roommate preference, if any:** (name) (both people must request each other) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If requesting a particular roommate, please ensure that they also request you. Staff will try to accommodate such requests if possible based on availability.

#### Single rooms: A limited number of single-occupancy rooms may be available for an additional $150, depending on attendance.

#### Do you wish to request a single room? No \_\_\_\_\_ Yes \_\_\_\_\_

Please indicate if you have a medical need that requires private accommodations: \_\_\_\_\_\_\_\_\_\_\_\_

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To request a single room, please send a separate check for $150 (payable to Dharma Zephyr) with your registration. This check will be held until shortly before the retreat and will be cashed only if we are able to offer you a single room.

**Carpooling:** Would you be willing to offer a ride to someone from your area?

Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, can they contact you directly? Yes \_\_\_\_\_ No \_\_\_\_\_

If you need a ride yourself, contact Karen Kvasnicka karen@dharmazephyr.org or at (775) 267-2424.

**Medical and dietary restrictions:**

Vegetarian meals will be provided based on the categories below, unless you have additional dietary restrictions. Please check the appropriate box (or boxes) below. Out of courtesy to others, in the dining hall during the retreat **please partake only of food that matches the selections you make here**.

Vegetarian (including eggs & dairy) \_\_\_\_

Vegan \_\_\_\_

Gluten Free \_\_\_\_

Lactose Free \_\_\_\_

Nut Allergy (specify which): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please list any other ingredients that you cannot eat under any conditions for medical reasons:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Do you have any medical needs or mobility limitations?** Please provide any other information that will assist us with your room assignment and your stay at Camp Galilee. Please note: all cabins and dormitories have a few steps at the entrances. Ability to negotiate gentle hills is required, and some accommodations have short pitches of steeper dirt/gravel access.

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#### Dana: Registration fees cover food, accommodation, teacher’s travel, and basic administration expenses. There will be an opportunity to offer donations at the end of the retreat to support the teacher and his ongoing efforts of serving the dhamma.

#### Scholarships: Would you be willing to help those who need additional financial assistance to attend this retreat or future retreats?

#### Yes \_\_\_\_\_ No \_\_\_\_\_ Amount enclosed $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Tax-deductible donations to the scholarship fund may be made payable to “Dharma Zephyr.” Please send your donation with your registration and write “Scholarship fund” on the memo line. If you need a partial scholarship to attend this retreat, please contact tom@dharmazephyr.org.

1. Please list the dates of any previous retreats you have attended that were taught by Santikaro.

2. Please describe your experience with other meditation retreats, if any. Approximately how many retreats have you attended? What was your longest retreat? Please list the approximate year, tradition, and teacher.

3. Please describe any other practices or retreats that have had a significant impact on your meditation practice.

4. Please describe any mobility limitations, physical limitations, or injuries that would prevent you from doing sitting and walking meditation, or require special accommodation.

5. Please describe any psychological conditions that might make meditation practice difficult at this time (such as grief, recent loss, depression, addiction, psychological illness, etc.). If you are experiencing intense emotional states, please check with your therapist to determine if this is an appropriate time for you to undertake a silent meditation retreat. We recommend that residential retreats be undertaken only by participants who are experiencing a considerable degree of mental stability.

6. This will be a silent retreat environment. Contact with the outside world is minimal. Participants need to be at ease with both silence and solitude. Noble Silence is required. Participants are asked to remain on the property during the course of the retreat. Would this environment be problematic for you? \_\_\_\_\_\_\_\_\_\_\_\_\_\_ If yes, please explain.

7. Is there anything else you would like the teacher to know that might help guide your practice during this retreat?

By signing my name below, I confirm that all of the above information is correct to the best of my knowledge. I understand that attendance is at the discretion of the teachers, and I agree to depart if requested by a teacher.

**WAIVER OF LIABILITY**

VOLUNTARY PARTICIPATION

1. I acknowledge that I have voluntarily applied to participate in a meditation retreat sponsored by Dharma Zephyr Insight Meditation Community starting on 3/31/2019, ending 4/3/2019.

ASSUMPTION OF RISK

2. I am aware that participating in this event may involve strenuous physical activities such as work meditation, yoga, or movement classes, as well as risks associated with hiking, contact with wildlife, and hazards associated with an outdoor environment including rocks, embankments, water, and waves. I am also aware that this is a silent, meditation retreat and that participants in such retreats may experience intense and unusual psychological, spiritual, and/or physical states of mind and body arising from the meditation and associated retreat activities. I am voluntarily participating in these activities with full knowledge of the risks involved, and hereby agree to accept any and all risks of harm that may result from these activities.

RELEASE

3. As consideration for being permitted by Dharma Zephyr Insight Meditation Community and Galilee Episcopal Camp and Conference Center to participate in these activities and use the facilities provided, I hereby agree that I, my assignees, heirs, distributees, guardians, and legal representatives will not make a claim against, sue, or attach the property of Dharma Zephyr Insight Meditation Community, Galilee Episcopal Camp and Conference Center, or any of their affiliates, employees, agents or volunteers, or any of their affiliated organizations for injury or damage resulting from acts, howsoever caused, by any employee, agent, or contractor of these organizations, or any of their affiliated organizations, as a result of my participation in this event, except when an employee, agent, or contractor of Dharma Zephyr Insight Meditation Community, Galilee Episcopal Camp and Conference Center, or any of their affiliated organizations exhibits gross negligence, or intentionally acts in a manner likely to lead to my being harmed. I hereby release Dharma Zephyr Insight Meditation Community, Galilee Episcopal Camp and Conference Center, and any of their affiliated organizations from all actions, claims or demands that I, my assignees, heirs, distributees, guardians, and legal representatives now have or may hereafter have for injury or damage resulting from my participation in this event, except when an employee, agent, or contractor of Dharma Zephyr Insight Meditation Community, Galilee Episcopal Camp and Conference Center, or any of their affiliated organizations exhibits gross negligence or intentionally acts in a manner likely to lead to my being harmed.

KNOWING AND VOLUNTARY EXECUTION

4. I have carefully read this agreement and fully understand its contents. I am aware that this is a release of liability and a contract between myself and Dharma Zephyr Insight Meditation Community, and/or their affiliated organizations, and sign it of my own free will.

**Signed** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Print Name** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_