



Practice Event Registration Form

Practice Event: _____

Dates and meals you will attend: _____

Partial attendance will be accommodated as space allows. Full attendance is encouraged.

Name: _____ Email address: _____

Day phone: _____ Evening phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Dietary restrictions: _____

Lodging: Camping:_____ or Zendo floor:_____ or Dorm (add \$20 per night):_____

Dorm only: Please bring your own sheets and pillowcase. If you **cannot** add \$5 for bedding:_____

Transportation: _____

Make a note here if you could use help with transportation within Bloomington, and indicate your arrival time and place. You will be contacted in advance if someone is available to provide this; otherwise, please arrange a means of transport. Please see the Directions section in CONTACTS on our website (www.sanshinji.org) for information about travel options.

Registration fee for Sanshin Zen Community retreats and sesshins:

Full attendance is \$225 for 5-day retreats or \$45/day for partial attendance, unless otherwise stated in the event description. A bunk bed in a shared room in our dorm is \$20/night. Please bring sheets and pillowcase. Add \$5 if you need us to supply this bedding. Please send full payment two weeks before the event (postmarked) to hold your space. Add 15% to the retreat fees if sent later than two weeks before the event.

Additional donations provided Sanshin Zen Community or to the teacher are appreciated.

Cancellation policy: Please give two week's notice. A full refund will be made with two weeks notice of cancellation. Otherwise, for cancellations within two weeks of the event, a 50% refund will be made.

Additional considerations:

Accessibility: Sanshinji's zendo is not wheelchair accessible. Other practice locations might be. Please call or email the event contact person for more information.

Medical conditions: Please inform the Ino (practice coordinator) of any relevant medical conditions once you arrive at the event.

Meals: Served buffet style.

If you would like to participate in **kitchen** duties during the retreat, please check here _____

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I would like to support Sanshin Zen Community with a tax-deductible donation.

Please accept my contribution:

___\$100 ___\$50 ___\$25 ___Other ___Once ___Monthly ___Quarterly ___Annually

Please return this completed registration form with your check, made payable to Sanshin Zen Community, to P. O. Box 1577, Bloomington, IN 47402

