

Chan Meditation Center 90-56 Corona Avenue, Elmhurst, NY 11373 Tel: 718-592-6593; Fax: 718-592-0717

E-mail: ddmbaus@yahoo.com Website: http://www.chancenter.org

Application for 2day 360-Degree Meditation Retreat and Golf Tournament 第一屆象岡盃禪修高爾夫聯誼會

at the Dharma Drum Retreat Center and Town of Wallkill Golf Club

184 Quannacut Road, Pine Bush, NY 12566 Website: http://www.dharmadrumretreat.org

June 10 (11:30 a.m.) to June 11 (8 p.m.), 2006

Fees: \$250.00 (includes single room accommodation, Green Fee and vegetarian meals)

**Green Fee no refund nor rain check

Payment is due upon the acceptance of your application.

Please send check payable to "DDMBA" to 90-56 Corona Avenue, Elmhurst, NY 11373

Please answer the following questions in detail. Add a separate sheet, if necessary. This information will remain confidential and will only be used by the retreat supervisors to help participants during the retreat.

I. Personal Data (Please Print)

Last Name	First Name	Chinese Name (if any	y) Sex		Date of Birth	Handicap
			M	F		
Mailing Address	3					
Telephone						
(Home)		(Office)		(Mobile Phone)		
Fax		Email			Religion (if any)	_
Occupation		Job Title			Highest Education Co	ompleted
Work/Business I	Background					
Recommended b	y (if any)		Telephone			

^{**}Meals: one lunch, dinner and breakfast in DDRC, one lunch bag with beverage and dinner in Golf Club

II. Previous Experience not essential, but please answer the following questions to help us prepare your stay.	for
Have you studied meditation before? ☐ No ☐ Yes Please describe briefly about the method you use if you have studied meditation before:	
III. Medical Information: Answers to the following questions are necessary to help determine whether participation on a retreat will aggravate a serious physical condition, endanger a participant's health. Therefore, it is extremely important that all information be complete, current, specific, and clearly stated	
 1. Have you ever been treated for serious emotional or psychological symptoms? □ No □ Yes. If yes, please state the nature of problem and current condition. 	
	es.
3. Do you have any allergies? ☐ No ☐ Yes. If yes, please specify:	
4. Have you ever had any serious infectious diseases? ☐ No ☐ Yes. If yes, please state the nature problem and current condition.	of
Application procedures: Due to limited facilities, your application may be denied due to space considerat You will be notified via mail or email to acknowledge the receipt of your application within two weeks of form's arrival at CMC. The acceptance notice will be sent to you via mail. If you have any questions, <u>ple Agnes Wu at (516) 993-1613</u>	f the
Please read the following statement carefully and sign below if it is accurate: I have read and understood the conditions and procedures stated in this application. All the information have provided is correct and complete.	ion I
Waiver of Liability: The following signatures indicate that the participant relieves the Chan Meditate Center, DDMBA, or DDRC from all liabilities in the event of any injury or illness incurred while visit DDRC.	
Signature Date	
Please send this application form for the 2-day 360-Degree Meditation Retreat and Golf Tournato:	ment
Chan Meditation Center /360-Degree Retreat 90-56 Corona Avenue Elmhurst, NY 11373	

To expedite the processing of your application, please fax this form to 718-592-0717 prior to mailing it to CMC.

Deadline: May 25th, 2006