

SEVEN-DAY GROUP MEDITATION APPLICATION

Date:

Name:

Email:

Address:

Phone:

Number attending:

Names & ages of each person attending:

1-Does anyone have **accessibility or dietary issues**? Meals will be 100% vegetarian with vegan option. Notify us of any food allergies or requirements. If so, please give names and special conditions required. One cabin is wheelchair accessible, but camp is on the side of a mountain and there are some areas that will not be accessible. Also property is at an elevation of 6,800 ft.

2-Are you or anyone whom you know who would be interested in this retreat a **certified EMT or equivalent medical professional** who would be willing to volunteer to meet our medical assistant requirements?

3-Do you have any **Dharma requests** (English only)? Please list:

See <https://learningfrombuddha.org/courses/r97x-solitary-retreat/> for "Dharma Practice check list."

4-Are you interested in option of taking the **Solitary Retreat** at this retreat?

See <https://learningfrombuddha.org/courses/r97x-solitary-retreat/> for more information on prerequisites.

If so, when and where did you do a seven-day meditation retreat?

If so, who is your Vajra Master or Dharma Teacher and do you have your teacher's approval to take the Solitary Retreat? If you do not, please explain.

5-Anything else you need to know about the retreat?

Please send this information to XuanfaInstitute@gmail.com, if you would like to reserve a space at this retreat. Or contact Zhaxi Zhuoma directly at 626-375-6328, text preferred.