

Self Realization Fellowship
ALOHA SILENT RETREAT REGISTRATION
March 18 - 21, 2010



Name _____

Address _____

Home Phone _____ Alternate Phone _____

Email _____ Website _____

Room Request *(rates based upon double occupancy; 2-3 to a room)*

I am attending alone — place me with roommate(s) as needed

I want to share a room — please list name(s): _____

I plan to stay off-site (list of nearby locations available upon request)

I am attending: full retreat (w/room & board) - \$600 full retreat (meals only) - \$170

partial retreat - \$50 registration, plus \$40 meal fee per day selected: 3/19 3/20 3/21

Have you ever been to a silent retreat? Yes No

Would you like to serve in any way at the retreat? Yes No Maybe

Any food allergies or special needs? _____

Person to contact in case of an emergency (phone and cell #): _____

***Cancellation Policy: Full Refund before February 1st. No refund after February 20th.
(You may apply your fee as a scholarship after this time for another devotee to attend, if you wish.)***

If paying with a check or money order, please make payable to MAUI MEDITATION CIRCLE and include with this form. If paying via Paypal, please enclose a copy of your payment confirmation. Thank you. We look forward to seeing you!

Namaste,

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Makawao, HI 96768
808-877-5575

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