

REGISTRATION FORM

Please print this page out and send it to the Registrar to complete your registration.

We expect this retreat to fill up quickly, so please register early to reserve a spot!

Name: _____

Address: _____

City/State/Zip: _____

Day phone: _____

Evening phone: _____

E-mail: _____

Check the appropriate box below:

- 9-day retreat (Friday 6/20– Sunday 6/29)
- 5-day retreat (Friday 6/20 – Wednesday 6/25)

The retreat is being held in a Boulder home and people will be sleeping at homes in the Boulder area. At the retreat site, there is room for two RV/camper vehicles.

Do you need a sleeping space? _____

Do you have sleeping space to share? If so, list # of spaces: for ___men and/or ___women. Thanks!

Please list requested roommates _____

Retreat Experience

Is this your first retreat? _____

Is this your first retreat with this teacher? _____

Suggested Donation for the Retreat Costs:

\$250 for 9 days

\$175 for 5 days

Donation for retreat \$ _____

Optional donation to Sierra Retreats
(Primarily used for Scholarships) \$ _____

TOTAL ENCLOSED \$ _____

Cancellations after June 1st will be subject to a \$50 fee. You may pay using a credit card through our website, SierraRetreats.org or mail a check, payable to Sierra Retreats to:

Lois VanderKooi, Registrar
710 Burbank Street
Broomfield, CO 80020

Meals

All meals are covered, including dinner Friday evening and a farewell lunch on Wednesday (5-day) or Sunday (9-day). Snacks will be served after the dharma talk in the evening. The meals are vegetarian, so if you need more protein, please bring some to supplement your diet. List any food allergies or other dietary needs:

Service Dana

Everyone will be doing a work period during the retreat as a part of practice and serving the community. Tasks will be assigned upon your arrival at the retreat. If you would like to help with the retreat setup at 4 pm on Friday, please let the registrar know.

Please Note

Meditating for extended periods can be physically and psychologically challenging. If you have any medical or mental health issues that might present problems during the retreat, and especially if your medical history includes psychiatric hospitalization or antipsychotic medications, please call Lois VanderKooi, PsyD at 303-439-0407 to confidentially discuss the possible challenges and benefits this retreat may offer to you.

You are also welcome to call with any other questions or concerns that you may have.

All communications will be held in confidence except to discuss specific needs with the teacher when appropriate.

Everyone please check this box

- My medical history does not include psychiatric hospitalization or antipsychotic medications OR I have discussed any such concerns with Sierra Retreats.

**Questions? Contact Lois at 303-439-0407
E-mail: loisvk@earthlink.net**