

REGISTRATION FORM

(Please Print)

RETREATANT INFORMATION			
<i>All retreatants, including children, must submit separate registration forms.</i>		Palyul Ling ID # (From Last Year's Badge):	
Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female			
Legal Name Last:	First:	Middle:	
If different from above, what name do you use?		Age/Birthdate:	
Street address: <i>Please rip off and include the label from any mailings you received from us, with any corrections.</i>			
City:	State:	ZIP Code:	Country:
Email address:			
Home phone no.: ()		Mobile / Work phone no.: ()	
Parent's/Guardian's Name:		Parent's/Guardian's signature:	
IN CASE OF EMERGENCY			
Friend or relative to contact in an emergency:		Relationship to retreatant:	
Home phone no.: ()		Work / Mobile phone no.: ()	
COURSE OF STUDY			
<i>Note: For Nyungné Retreat on July 4 – July 7, please use the separate specific application form available on http://retreat.palyul.org.</i>			
● FULL SESSION RETREATS <i>Please select only one:</i> <ul style="list-style-type: none"> <input type="checkbox"/> 1st Year Ngöndro <input type="checkbox"/> 2nd Year* Tsa Lung <input type="checkbox"/> 3rd Year* Tögyal I <input type="checkbox"/> 4th Year Tögyal II <input type="checkbox"/> 5th Year Trekchöd I <input type="checkbox"/> 6th Year Trekchöd II <input type="checkbox"/> 7th Year Trekchöd Heart Teaching <input type="checkbox"/> 8th Year & up Advanced Teaching 		● PARTIAL SESSION RETREATS ○ Ngöndro Students: <ul style="list-style-type: none"> <input type="checkbox"/> July 10-18 The Four Thoughts that Turn the Mind to Dharma <input type="checkbox"/> July 19-21 Refuge Vows & Practice <input type="checkbox"/> July 22-24 Bodhisattva Vows & Compassion Practice <input type="checkbox"/> July 25-28 Mandala Offering <input type="checkbox"/> July 29-Aug 1 Vajrasattva Purification Practice <input type="checkbox"/> Aug 2-5 Guru Yoga <input type="checkbox"/> Aug 5-10 Phowa <p> ○ Half Session 1: July 10-24:: <input type="checkbox"/>2 <input type="checkbox"/>3 <input type="checkbox"/>4 <input type="checkbox"/>5 <input type="checkbox"/>6 <input type="checkbox"/>7 <input type="checkbox"/>8+ ○ Half Session 2:** July 25-Aug 10: <input type="checkbox"/>2 <input type="checkbox"/>3 <input type="checkbox"/>4 <input type="checkbox"/>5 <input type="checkbox"/>6 <input type="checkbox"/>7 <input type="checkbox"/>8+ </p>	
● PER NIGHT: If coming for less than a partial or half session, returning retreatants may attend only their previous class.			

ARRIVAL AND DEPARTURE INFORMATION			
Official Arrival Dates:	<input type="checkbox"/> Full session: July 8-9 (orientation 6 PM on 7/9) Half sessions: <input type="checkbox"/> July 8-9 (dep. morn. 7/24) <input type="checkbox"/> July 25- August 10** (arr 7/24)		
Alternate Arrival Date:	<u>MM</u> / <u>DD</u>	Time:	Alternate Departure Date: <u>MM</u> / <u>DD</u> Time:
How are you traveling to the retreat? <input type="checkbox"/> Bus <input type="checkbox"/> Car <input type="checkbox"/> Air			
* A retreatant who has practiced Ngöndro in another tradition may apply for Tsa Lung or Tögyal only upon the written approval of Retreat Master. Please contact the center at retreat@palyul.org to make your request.		This form is meant for retreatants attending three days or more of our program. Please complete separate forms for non-contiguous sessions or Visitor Form for weekends. For example: One form for the week of July 10 to 24, and a separate, visitor form (available on the website) for the nights of July 30 and 31; or one form for Nyungné and one for the full session retreat. Accommodations July 7 are \$50/night.	
** Any retreatant who participates in a half-session retreat must first attend the beginning session of his or her particular class level. No one will be permitted to attend the second session without having attended the first. Arrival date is July 8 & 9 for the first session and July 24 after 3 PM for the second session. Check-out required by 11 AM day retreat ends so we can prepare for next retreatants.		Arrival time is after 3 PM to 6 PM day before session commences. If you wish to arrive earlier, you may wish to offer for your food and teaching for that day. First-time retreatants should be sure to attend orientation, 6 PM on July 9).	

Last Name:

First Name:

Form as of March 1, 2019

PERSONAL INFORMATION

I would like to share a room/tent with:

Note that your roommate must file an application for retreat within **10 business days** of our receipt of this application confirming their attendance.Are you a vegetarian? Yes No Do you have any dietary restrictions? Yes No Describe:

* Palyul Ling cannot accommodate special diets. Retreatants must make their own arrangements. Please notify us of severe allergies.

Do you have any chronic health issues? Physiological: Yes* No Psychological: Yes** NoDo you require medication or other treatment to manage your condition? Yes No

* At your discretion, please describe on a separate sheet in a way to help guide the office in case of an emergency and to help us place you in the appropriate housing.

All information is held in strictest confidence; completion of health information on form optional. While the center is accessible, the site is rustic.

** Retreat should not take place of regular treatment. Please seek the advice of your doctor or therapist prior to registration.

RETREAT WORK ROTA ASSIGNMENT All retreatants must participate in rota. It may not be possible to give your first choice.KITCHEN: Dish & pot washing Dining hall mopping Food prep & chopping Meal set up, serving & clean upMAINTENANCE / GROUNDS: Bathroom Garbage & Recycling GardeningOTHER: Please place me where help is most needed Special Skills / Professional Expertise - List out:**TUITION FEE TABLE** Per person, not per room; circle first choice; tick box below for second choice.

	South/Single	South/Shared	North/Single	North/Shared	East/Single	East/Shared	Tent/Single	Tent/Shared	Off-site
Full Session	<input type="checkbox"/> \$ 3810	<input type="checkbox"/> \$ 2530	<input type="checkbox"/> \$ 3630	<input type="checkbox"/> \$ 2420	<input type="checkbox"/> \$ 3450	<input type="checkbox"/> \$ 2310	<input type="checkbox"/> \$ 2150	<input type="checkbox"/> \$ 1870	<input type="checkbox"/> \$ 1550
Half Session	<input type="checkbox"/> \$ 1905	<input type="checkbox"/> \$ 1265	<input type="checkbox"/> \$ 1815	<input type="checkbox"/> \$ 1210	<input type="checkbox"/> \$ 1725	<input type="checkbox"/> \$ 1155	<input type="checkbox"/> \$ 1075	<input type="checkbox"/> \$ 935	<input type="checkbox"/> \$ 775
Additional Nights	<input type="checkbox"/> \$ 145	<input type="checkbox"/> \$ 105	<input type="checkbox"/> \$ 135	<input type="checkbox"/> \$ 95	<input type="checkbox"/> \$ 125	<input type="checkbox"/> \$ 85	<input type="checkbox"/> \$ 85	<input type="checkbox"/> \$ 75	<input type="checkbox"/> \$ 65
2 nd Choice:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Notes: 1) Tuition fee is per person and includes accommodations, all meals, and teachings. Texts/other practice items additional. 2) All room assignments on a first-come-first-served basis. Space is limited so you may be assigned 2nd choice. If you have a health reason to request a certain accommodation, please register early and include reason for request. 3) **Important:** "Half Session" check-out dates are Aug 29 for the first half and check-in on Aug 29 for the second half. Use "Additional Nights" if arriving or departing earlier or later. We will inform you if your room option chosen will require a shift in accommodation. 4) Retreat activities end early afternoon of 10 August. *Limited availability. Cost is per person and assumes three or more roommates per room (formerly called "family room.")

RETREAT FEE CALCULATION

Enter Retreat tuition from "Tuition Table," above:

Note: 1) If you are not attending according to the full or half session, fee is calculated per night; 2) Arrivals before 3 PM for first day of part-time retreat are billed an additional day's tuition; 3) All children must submit a separate form. Full Session Half Session: \$US _____ Per Night: (nights) x (fee) = \$US _____

Choose ONE only. No combining of discounts; application must be accompanied by payment in full.

 Pre-registration early bird (postmarked by **June 10**): 10% off - Multiply total by 0.90. Student: 25% off (**shared tent only** with student I.D. and proof of full-time student status) - Multiply total by 0.75. Ordained sangha: 50% off (**shared tent only** with proof of ordination) - Multiply total by 0.50. Teens between 12 to 17 (**shared tent only**): less 50% of fee from table above - Multiply total by 0.50. Children aged 4 -12: 75% off (with **non-discounted payment of single room or single tent fee** by parent/guardian) - Multiply total by 0.25 8th Year early bird (postmarked by **June 10**): 25% off - Multiply total by 0.75 (must have completed one month in 7th year course; registering one week or longer; **SHARED accommodations only.**) x 0.

Donation: Please consider offering your discounts or making an additional donation. \$US _____

If you are paying by credit card or PayPal, please consider offering 3% to cover their fee. **TOTAL** \$US _____ I have read and understand the Retreat Refund and Cancellation Policy here: <http://retreat.palyul.org/cancellations-and-refunds>. Please mail me a copy of the policy. My payment is enclosed or in process at PayPal. I understand that my application will only be processed upon receipt of tuition and acceptance of refund policy.**PAYMENT DETAILS** Money order Check enclosed Visa MasterCard (No Diner's Club or American Express) PayPal (retreat@palyul.org)Check No. Checks are the *preferred payment method*. Please make checks payable to **Palyul Ling International**.

Name on Card: Billing Address, if different:

Billing City, State, Zip: *Card #:

Expiration Date: MM / YY *CCV No: Signature:

*The "CCV number" is the three-digit security code on the reverse side of your card, after the account number.

MAIL TO: PALYUL LING INTERNATIONAL, 359 HOLLOW ROAD, McDONOUGH, NY 13801

*It is NOT secure to send your application with credit card number by email. Palyul Ling cannot be responsible for any incidents of identity theft resulting from anyone who chooses to send their application by this method. Please ONLY use postal mail or fax. Thank you!

Last Name:

First Name:

Form as of March 1, 2019