# Retreat Registration Form

## 2020 Won Buddhism Retreat: Power of Meditation and Mindfulness Journaling

**Date:** March 5th (Thursday) – March 8th (Sunday), 2020

<table>
<thead>
<tr>
<th>Per person</th>
<th>Adult Standard</th>
<th>Member Discount</th>
<th>Local Resident / Teenager Discount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Single room</td>
<td>$515</td>
<td>$410</td>
<td>$460</td>
</tr>
<tr>
<td>Double room</td>
<td>$410</td>
<td>$330</td>
<td>$370</td>
</tr>
<tr>
<td>Quad room (sleeps 4 persons)</td>
<td>$340</td>
<td>$270</td>
<td>$310</td>
</tr>
<tr>
<td>Dorm/Commuter</td>
<td></td>
<td>$250</td>
<td></td>
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Dorm room option is open only when there are more than 38 people.
- The member discount is for those who has a Won Buddhism dharma name or a person who has the recommendation of a Won Buddhism minister.
- The local residents discount is for residents of Columbia County, NY.
- Discount is NOT applied for dorm, camping and commuters.

## Payment

To complete registration, please (1) fill in the application form and (2) make a payment. A $50 **nonrefundable deposit** is required for all reservations. You may pay the entire amount when making the reservation or pay the balance upon your arrival or any time prior to the retreat. Payments may be made on our website via PayPal, or by sending a check.

Please make your check payable to **Won Dharma Center** and mail it to:

Won Dharma Center  
361 State Route 23  
Claverack, NY 12513

## Cancellation Policy

- If you cancel 7 or more days prior to the retreat, your payment will be refunded in full (less the $50 non-refundable deposit).
- If you cancel less than 7 days in advance, a nonrefundable credit toward a future Won Dharma Center program or stay is available.
- No credit or refund is available if you cancel on the retreat arrival date, or if you leave the retreat early for any reason.

For questions, please call us at 518-851-2581 or email us at info@wondharmacenter.org
# Personal Information

<table>
<thead>
<tr>
<th>Name:</th>
<th>Age:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dharma Name (If applicable):</td>
<td>Gender:</td>
</tr>
<tr>
<td>Address:</td>
<td></td>
</tr>
<tr>
<td>City:</td>
<td>State:</td>
</tr>
<tr>
<td>E-mail:</td>
<td></td>
</tr>
<tr>
<td>Phone(H):</td>
<td>Phone(C):</td>
</tr>
</tbody>
</table>

Do you snore loudly? ___ Yes ___ No

## Health and Diet

Please indicate any current physical problems or allergies that you feel the WDC staff should know about:

Have you ever eaten Korean food? _____

Do you have any dietary restrictions and/or food allergies? ______________________________________

Emergency Contact: Phone:

Would you like to be added to our email list? ___ Yes ___ No

Do you currently meditate? ___ Yes ___ No

If so, how long have you practiced? __________

What tradition? __________

How long do you usually meditate? _________

How many WDC retreats have you attended? _________

I, the undersigned, agree to follow the retreat guidelines and the instruction of the teachers.

Signature ____________________________ Date______________
VOLUNTARY PARTICIPATION
I acknowledge that I have voluntarily applied to participate in the Won Dharma Center (WDC) retreat "Won Buddhism Retreat: Power of Meditation and Mindfulness Journaling" to be held at 361 State Route 23, Claverack, NY, 12513, from March 5th, 2020 to March 8th, 2020, referred to below as “this event”.

ASSUMPTION OF RISK
I am fully aware that participating in this event may involve physical activities such as meditation, yoga, or movement activities, and work (e.g., in the kitchen) as well as risks associated with hiking in a rural setting such as contact with poison oak and wildlife. I am also aware that participants may experience intense psychological, spiritual and/or physical states of mind and body arising from the retreat activities. I am voluntarily participating in these activities with full knowledge of the risks involved and agree to accept any risk that arises as a result of my participation.

RELEASE
As consideration for WDC allowing me to participate in these activities and use their facilities, I hereby agree that neither I, nor anyone acting on my behalf will make a claim against, sue or otherwise find fault with the property of WDC, its affiliates, employees, or volunteers or any of its affiliated organizations for injury or damage resulting from acts, howsoever caused, by any employee of WDC, or any of its affiliated organizations, as a result of my participation in this event. I release WDC from all actions, claims or demands that I, or anyone acting on my behalf, may have for injuries or damages I incur from my participation in these activities.

KNOWING AND VOLUNTARY EXECUTION
I have carefully read this agreement and fully understand its contents. I am aware that this is a release of liability and contract between myself and WDC and its affiliated organizations. I sign it of my own free will.

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Printed Name                                      Date

Signature

PHOTO/VIDEO
I hereby grant WDC permission to use my likeness in a photograph or video in any and all of its publications, including website entries, without payment or any other consideration. I agree that these materials will become the property of the WDC and will not be returned. I hereby irrevocably authorize the WDC to edit, copy, publish or distribute this photo or video for purposes of publicizing WDC programs or for any other lawful purpose.

KNOWING AND VOLUNTARY EXECUTION
I have carefully read this agreement and fully understand its contents. I am aware that this is a release of liability and contract between myself and WDC and its affiliated organizations. I sign it of my own free will.

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Printed Name                                      Date

Signature                                      Email Address (If you’d like to be on our mailing list)