



内观禅修中心 (新加坡)
Vipassana Meditation Centre (Singapore)

No 1 Paya Lebar Walk Singapore 535926
Tel : 6 445 3984 Email : vmckm@singnet.com.sg Web Site : <http://vmc128.8m.com>

Application Form For One Day Mindfulness Retreat

I am interested to attend the One Day Mindfulness Retreat on 30 Oct 2004

I *do not need () * need () to take lunch on the day.

Name: _____ Age: _____ Sex: () Female () Male

Address: _____

Contact No: [HP/Tel] _____ Email: _____

Identity Card No/Work Permit No/Employment Pass No: _____

- Expiry Date (if applicable): _____

Are you new to Buddhist Meditation? Yes () No ()

If “No”, please specify the type(s) of Buddhist Meditation and the names of the teacher:

Next of Kin to be contacted in case of emergency:

Name: _____ Relationship: _____

Address: _____

Contact No: HP: _____ Tel: _____

---- **Please tick one:** [] I'm already on the mailing list, [] Pls put me on your mail list

I, _____, the undersigned declare that the above information is true and am willing to abide by the Meditation Teacher's advice and Retreat Regulations. Otherwise, I will leave on my own accord. I also understand that the VMC and owner of the retreat premises will not be responsible for any mental or physical injury, losses or damage of whatsoever nature suffered by me during the retreat.

Applicant's Signature

Date

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For official Use

Application approved by: _____ **Date:** _____

Remarks: _____
