

Madison Vipassana, Inc.
Residential Meditation Retreat with Ayya Medhanandi
May 21–24, 2017
Pine Lake Retreat Center, Westfield, WI
— Registration Form ❖ Please Print Clearly —

Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

Birth date _____ Gender (optional) _____

Indicate if you are applying for one of our reserved spaces for . . .

Young adults Persons of color

Rooms . . .

Indicate whether you wish to register for a double or a single room:

Double room Single room

Room assignments are made by the retreat manager before the retreat begins. In assigning single rooms, we give priority to those whose health, mobility, or other special circumstances would make it difficult to share a room. If we are not able to accommodate your request for a single room, please indicate whether we should:

Place you on a waiting list for a single room. Place you in a double room.

Special circumstances or requests . . .

I would like to use to an assistive listening device. (If you have questions about our assistive listening devices, please contact Scott Knickelbine at scottknickelbine@gmail.com.)

I snore. I use a CPAP or other medical device.

If you have any other special needs, requests, or information to share with us, please explain below or contact the registrar, Ann Varda, at registrar.madvip@yahoo.com or 608-843-7531. _____

Sitting preferences . . .

To help us set up the Dhamma hall, please indicate whether you prefer to sit primarily on the floor or in a chair. We will have extra chairs, but not enough to reserve both a chair and a place on the floor.

Chair Floor

We will have just a few extra meditation cushions available to borrow during the retreat, so please bring your own cushion or bench if you have one.

A few last details and a request for help with setup and cleanup . . .

This is my first vipassana retreat.

I can help set up before the retreat. I can help clean up after the retreat.

I need a ride from _____ . I can give a ride to ___ passengers from _____ .

I enclose an additional \$ _____ to be used for scholarships for future retreats.

Send your completed registration form with a check for the \$100 deposit to:

Madison Vipassana, Inc., c/o Ann Varda
1724 Hoyt St.
Madison, WI 53726

Checks payable to Madison Vipassana, Inc.

Financial assistance is available through our retreat scholarship program. If payment of the \$100 deposit is a barrier to your registration, please contact the registrar, Ann Varda, at registrar.madvip@yahoo.com or 608-843-7531 to discuss how we can help.