



Registration Form

2019 Supported Solitary Retreat, Vejjasala, Wingello, NSW

Friday 1st - Sunday 31st March

First half: Monday Friday 1st to Saturday 16th March

Second half: Saturday 16th - Sunday 31st March

Name

Address

.....

Phone number(s)

Email address

Male Female Age

Are you applying for the whole month, the first half or the second half (tick one only)?

Whole month. First half only Second half only

Have you done at least three weeks on silent meditation retreats? Yes ... No ...

Contact person in case of emergency

Relationship of contact person (eg, friend, partner, parent)

Phone number(s) of contact person

Any special needs?

.....

Transport to and from Vejjasala

If you can offer a lift, please say from where and number of people

If you'd like a lift, please say from where

Teachers: There are six listed teachers available for twice-weekly interviews. There is also the possibility of making arrangements with other teachers.

Teacher	Available for full month or first or second half	Available for first or second half only	Face to face contact or phone / Skype
Subhana Barzaghi		Yes - 1 st half	phone/Skype
Victor von der Heyde	Yes		face to face
Jess Huon		Yes - 2 nd half	phone/Skype
Patrick Kearney	Yes		phone/Skype
Kirsten Kratz	Yes		phone/Skype
Carol Perry	Yes		phone/Skype

Please list your preferred teachers in order of preference (unless you're making arrangements with another teacher):

- 1.
- 2.
- 3.
- 4.
- 5.

If you have listed Subhana Barzaghi, when and where did you do a retreat with her?

.....

Teachers will be allocated on a first requested basis with people doing the full month given priority.

If you wish to have interviews with a teacher not listed, all teachers in the Insight Network Teachers Group (on www.dharma.org.au) and all teachers listed on www.dharmaseed.org are acceptable. For teachers not in these groups, please check with the registrar before you make any arrangements.

If you have made an arrangement with a teacher not listed, please ask them to email the registrar confirming that they will be offering two interviews with you each week of your retreat.



Acknowledgement of Risks

On silent meditation retreats people can experience intense and unusual psychological, spiritual and/or physical states. Retreats may not be helpful for people with particular psychological conditions. On this particular retreat centre there will be less personal support for most participants since most of the teachers will not be on site.

In voluntarily participating on this retreat I am aware that I may be exposed to risks that may lead to psychological issues. I have considered the risks before choosing to sign this form. I still wish to participate in the retreat. I accept that in signing this form I will take full responsibility and liability for my own property, health and safety.

Name

Signature

Date



Participant Information for Teachers

Supported Solitary Month Friday 1st - Sunday 31st March 2019

Information on this page is confidential and will only be seen by the registrar and teachers

Name

Male Female Age

Life situation / occupation

.....

Do you have or have you had any alcohol or drug dependency? Yes No

If yes, please describe and state whether past or current

.....

Do you have or have you had any diagnosis of a mental health condition

Yes No

If yes, please describe and state whether past or current

.....

Do you have any medical condition(s) that might require treatment during the retreat?

Yes No If yes, please describe

.....

Outline background in meditation retreats, covering at least three weeklong retreats (or equivalent in terms of time on retreat)

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Physical, emotional or other conditions that might be an issue on the retreat

.....

.....

Signature

Date