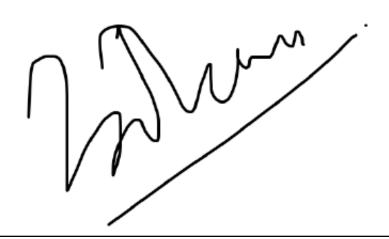
Online Application Form for the Meditation Retreat

It is essential to have previous experience in Mahasi Meditation Method and to strictly adhere to the 9 precepts and retreat schedule. Signed application needs to be received before coming to the center. Final-acceptance by SMSC required. (If you have no access to sign on-line can sign on arrival to the Retreat Center)

1. Personal Information		
First Name	min min	
Last Name	thein	
Gender	Male	
Address line 1	testing	
Address line 2		
Postal Code		
Province/Territory	test	
City	test	
Country	Afghanistan	
Phone	123	
Email	minminthein@gmail.com	
Occupation	testing	
Date of Birth	17/11/2019	
Canadian Driver	testing	
License No.		
Passport No.		
Date of Issue		
Origin Country		
Government issued		
photo ID		



2. Additional Information

Request retreat peri-

From Date	20/11/2019
To Date	24/11/2019

Emergency Contact	
First Name	ds
Last Name	asdf
Relationship to you	sadf
Address line 1	sadf
Address line 2	
Postal Code	
Province/Territory	sadf
City	sadf
Country	Algeria
Phone	121212
Email	minminthein@gmail.com

Most recent meditation retreats attend (Theravada and non-Theravada), up to 5 retreats.

3. Meal and Medical Information

Please answer a few more questions about meals and medical insurance so that we can

provide you best based on your needs. All fields are mandatory				
Are you Vegetarian?	Yes			
Do you have food or other allergies? If yes, please specify.		Yes		
Do you have BC or any other type of health insurance? Please specify type of health insurance. (It is imperative to have health insurance.)				
Do you have any physical or mental health issue SMSC should be made aware?. If yes, please specify		Yes		

4. Policy and agreement

Please read this carefully before you submit this form online.

- 1. I agree to abide to the following rules and structure:
- Practice Mindfulness-Insight (Mahasi Tradition) only
- Strictly adhere to Nine Precepts
- Maintain Noble Silence
- Slow down all actions and behavior at all time
- Follow retreat schedule
- Anyone who becomes a disturbance to the retreat will be asked to leave
- 2. I am aware that I may be photographed or videotaped at retreat for sharing among SMSC participants, yogis and SMSC Dhamma friends.
- 3. I agree to keep my personal information on the SMSC file.

If "No", you will need to fill up this form at every future retreat you attend.

Yes

BY SUBMITTING THIS ELECTRONIC APPLICATION I WAIVE ALL FORM OF LIABILITY TOWARDS SMSC, ITS STAFF AND VOLUNTEERS FOR THIS RETREAT AND ALL OTHER

RETREATS I WILL BE ATTENDING AT SMSC.

First Name: asdf, Last Name: sadf

Date: 26/11/2019

4/4