

**FME \_\_\_\_\_ -09**

2499 Melru Lane, Escondido, CA 92026-8447 tel (760) 291-1003 fax (760) 291-1010  
 deerpark@dpmail.net www.deerparkmonastery.org

# Fall 2009 Meditation and Education Retreat Registration Form

**November 6 - 8, 2009**

<b>Arrival Details</b>	<b>Date</b>	<b>Time -----</b>
Arrival date (Friday)	November 6, 2009	AM/PM
Departure date (Sunday)	11/08/09	AM/PM

Family Name	Given Name	MI	Age	Gender (M/F)	Housing Type (D) (T)	Contribution
1. _____						\$ _____
Street: _____						
City/State: _____				ZIP: _____		
Phone: ( ) _____			E-Mail: _____			

College or University you are enrolled in:

**Teachers:** (D)orm: \$70 (T)ent!: \$50

**Students:** (D)orm: \$50 (T)ent!: \$35

1- Limited camping spaces are available for TENTS (guest provides their own tent).

### Registration & Methods of Payment:

Please mail the entire payment with your registration form. As we do not reserve accommodations without payment, please do not FAX your registration form, unless you provide us with your credit card information (see below). To pay by credit card, you may also register online, using our secure server at <http://www.smartcart.com/ubcgateway/catalog/>. **Please do not send cash.**

Please send completed form and contribution to: **Deer Park Monastery, 2009 FME Retreat 2499 Melru Lane, Escondido, CA 92026**

• FAX it to (760) 291-1010; • E-Mail it to [deerpark@dpmail.net](mailto:deerpark@dpmail.net); • or Register online at [www.deerparkmonastery.org](http://www.deerparkmonastery.org).

Check       Money Order       Master Card       VISA       AMEX     

**Discover**

Credit Card # \_\_\_\_\_ Expiration Date (mo/yr) \_\_\_\_\_

Cardholder's Name (as it appears on the credit card): \_\_\_\_\_

**Billing Address of Credit Card (required by bank for credit processing):**

Street Address: \_\_\_\_\_

City/State : \_\_\_\_\_ ZIP: \_\_\_\_\_

<b>Cardholder's Signature:</b> (authorizing Deer Park Monastery to charge your accommodation costs to your credit card)
--

<b>FOR OFFICE USE ONLY</b>	<b>Total Due:</b> \$ _____
Received: ___/___/___ (Signed) _____ Confirmation Sent: ___/___/___ <input type="checkbox"/> E-mail <input type="checkbox"/> US Mail (Signed) _____	
Date ___/___/___ <input type="checkbox"/> Money Order <input type="checkbox"/> Master Card <input type="checkbox"/> VISA <input type="checkbox"/> AMEX <input type="checkbox"/> Discover	\$ _____
Date ___/___/___ Check # _____ Bank _____	\$ _____
Date ___/___/___ Cash (Signature) _____ Date _____	\$ _____
<b>Balance Due:</b>	\$ _____

### Cancellation Policy: (please call if you have any questions)

- 31 days prior to arrival: 85% refunded; 15% cancellation fee
- 15-30 days prior to arrival: 75% refunded; 25% cancellation fee.
- 8-14 days prior to arrival: 50% refunded; 50% cancellation fee
- 7 days prior to arrival: No refund

**Liability waiver:** (The following signatures indicate that participants relieve Deer Park Monastery and its members from all liabilities in the event of any injury or illness incurred while visiting and residing at Deer Park Monastery.)

Date \_\_\_/\_\_\_/\_\_\_ Signed: \_\_\_\_\_

**In Case of Emergency:** Contact name: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_