

Garrison Institute Registration Form

PLEASE COMPLETE IN FULL AND PRINT CLEARLY

Mail to: Garrison Institute, PO Box 532, Garrison NY 10524

Yongey Mingyur Rinpoche

The Path of Liberation: Milarepa's Songs of Realization

June 29 – July 4, 2010

Name _____ Gender _____

Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

Have you been to the Garrison Institute before? Yes _____ No _____

If yes, is this a new address? Yes _____ No _____

How did you hear about this retreat? _____

This retreat is for experienced practitioners of all Buddhist traditions who meet at least one of the following criteria. Please tick the box(es) that apply to you. I have:

- Attended Mahamudra Level 1 or Path of Liberation Level I with Yongey Mingyur Rinpoche and completed its practice requirements
- Completed the full preliminary practices (4 x 100,000)
- Received 'pointing out' teachings from Tulku Urygen Rinpoche, Chokyi Nyima Rinpoche, Tsoknyi Rinpoche or Mingyur Rinpoche
- Have had a daily meditation practice for at least five years and attended either group or solitary practice retreats (with 6+ hours of formal meditation practice each day) under the guidance of a Buddhist teacher for a total of at least thirty days

Retreat costs include program fee, room and meals. Please indicate your room preference. *(Use HJ rate if you are willing to do a daily house job of about one hour):*

- Single \$665
- Single with HJ \$615
- Double \$590
- Double with HJ \$540
- Dorm \$515 *(located on the 4th floor, limited availability)*
- Dorm with HJ \$465 *(located on the 4th floor, limited availability)*
- Commuters \$390

There are a limited number of work scholarships being offered for this retreat. Contact the Garrison Institute for more details and availability.

Roommate preference _____

Please indicate any physical disabilities to assist in assigning your room (*there is no elevator*) _____

_____ I am paying by check made out to Garrison Institute

_____ I am paying by credit card (Visa, MC, AMEX, or Discover)

Credit Card # _____

Exp date _____ Name on Card _____

Signature _____

Amount \$ _____ full payment required.

You may FAX this registration to Garrison Institute at 845-424-4900 (*credit card only*). A confirmation letter will be sent to you once required registration deposit or payment in full is received. ***The cancellation fee is \$60. Cancellation fees are donated to our scholarship fund.***