



BLUE CLIFF MONASTERY

FILE NO.

Holiday Retreat Registration Form DEC 29th 2011- JAN 2nd 2012

3 Mindfulness Road, Pine Bush, NY 12566, email: office@bluecliffmonastery.org
www.bluecliffmonastery.org Tel: 845-733-5653/4959 Fax: 845-733-4300

Please type or print the requested information below clearly

-Rates: The contribution is towards food, lodging, utilities, and tuition for per person per night and day.

-Housing Information: Due to the limited housing at Blue Cliff Monastery, you can either choose dormitory, (*a few single, double rooms available*) or camping in the premises of Blue Cliff. Most rooms are 6-8beds (bunk beds) with private bathroom some rooms are 3-5beds for family with children.

-Contributions to BCM Renovation: Your generosity will makes it possible for us to renovate and winterize some of the buildings for monastics and general retreatants.

Housing Codes	Accommodation Type (if you do not specify a roommate on this form we will assign you roommates by gender)	Fees/Person/4days (\$)
DORM-A	ADULT 4-7 person room with private bathroom	248.00
DORM-S	STUDENT/Senior (<i>ages 18-26 & 65-over with I.D</i>) 4-7 person room with private bathroom	180.00
DORM-T	TEEN (13-17) 4-7 person room with private bathroom	128.00
DORM-C	CHILD (6-12) 4-7 person room with private bathroom	100.00
COUPLE	2 separate beds with private bathroom <i>limited (3)</i>	280/Person
CAMP	ADULT Camping with public bathroom PLEASE BRING YOUR OWN TENT NOT FOR THE WINTER	45.00

Last name, First name (1. the contact person in the retreat)	Age	Gender	Housing Codes	Amount
1.				
2.				
3.				
Contribution to BCM renovation (optional):				\$
Total Due:				\$
Amount Enclosed:				\$
Balance Due:				\$

Day of Visit: From : _____ To: _____ Time of arrival: _____

Address : _____

City : _____ State : _____ Zip: _____ Country: _____

Daytime phone: _____ Evening phone: _____

Email: _____

In Case of Emergency Contact - name: _____ Phone _____

Please let us know if you have received the Five Mindfulness Trainings. Yes / No (please circle/high light)

Means of Transportation (please circle, highlight or underline) :

Train / Bus / Own Car **Time of Arrival** (if known in advance).....

(Transportation from Middletown bus/train station is provided by us on **Arrival Day / Thursday before 6:00 PM**, and on **Departure Day / Monday before 6:00 PM**. Contribution is \$15.00 each way for pick-up. Please add this to the contribution for accommodation. There will be no pick-up / drop-off service on other days.

After 6:00 PM, Please Call Pine Bush taxi 845-283-8294 or Ellenville 845-647-6868 to arrive to BCM. For Stewart Airport (SWF), you can use Visconti Airport shuttle service at 845-567-3560.

Please contribute upon arrival day or send a check: BLUE CLIFF MONASTERY to reserve your space if you wish to stay a week or longer

Method of Payment: ___ Check ___ Money Order ___ Cash

Please sign below:

I, the undersigned, am aware that during my stay at Blue Cliff Monastery I am responsible for my well-being and the monastery cannot be responsible for any accidents that befall me. Meditation is a complement but not a substitution for psychological drug treatment.

Signed: _____

Date: _____