

Application for 2022 Group Retreats with Lama Ngawang Tenzin

Please submit your application to skc.retreat@gmail.com

Please email us if you require a Word version of this application.

Sakya Kachod Choling is set in a pristine hilly forest on San Juan Island, off the coast of Washington state.

It provides basic facilities for tranquil retreat.

re provides susie identifies for	trunqui rottout.
I. General Back	ground
ears on a government-issued I	D card or passport.
	Middle Name:
na name or nickname, please i	nput that name here:
Age:	
oiritual tradition, practi	ces, and anything else you'd like to share
ist monk or nun?	
II. Your Conta	ct Info
Home phone:	Work phone:
city, state or province, zip c	ode, and country):
	oiritual tradition, practi

Full Home Address (if different from mailing address; otherwise leave blank):

III. Your Requested Retreat Plans

Which retreat do you plan to attend?

White Tara Teachings and Short Retreat ~ May 19 - 22, 2022

Prerequisite: You must have received the White Tara empowerment from a qualified Sakya lama.

For White Tara retreat, you should plan to arrive by no later than noon on May 19. You may arrive a day early, on May 18, at no extra cost.

Vajrayogini One-Week Retreat ~ July 22 - 30, 2022

Prerequisites: You must have received the following from a qualified Sakya lama: 1) the major two-day empowerment of either Chakrasamvara or Hevajra; 2) the uncommon Vajrayogini blessing in the Naro Khachod tradition; and 3) the complete teachings on the 11 yogas (often called the seven-day teachings) that authorizes you to practice the long uncommon Vajrayogini sadhana.

For Vajrayogini retreat, you should plan to arrive by no later than noon on July 22. You may arrive a day early, on July 21, at no extra cost.

Duration of your retreat. If you plan to arrive early or stay later for either retreat, please enter that request in this comment box, with the requested arrival and departure dates.

IV. Your Requested Housing and Meal Options

For housing, please rank in order of preference (1st choice and so on). If you will not consider a housing option, put an X next to it. Prices are set for each group retreat. See <u>our website</u> for details.

Large retreat room inside main building Retreat Hut

Small retreat room inside main building Canvas tent provided by SKC

Yurt Bring your own camping tent

The center prepares vegetarian meals during group retreats.

We cannot guarantee that we can meet all dietary needs and restrictions.

We cannot guarantee that food is free of all allergens.

Thanks for understanding.

Please list any dietary restrictions or food allergies:

Please include any additional information regarding your requested stay:

V. Volunteer Info

Your assistance is much appreciated. Volunteer tasks include help with cooking, cleaning dishes, cleaning facilities and restrooms, setting up and taking down offerings in the shrine room, cleaning and resetting the shrine room, and general caretaking around the property. Please let us know in the comment box if there are any tasks of particular interest, or if you're physically unable to do certain tasks.

VI. Doctor and Emergency Contacts

Please include the name of a doctor and contacts we can call in the event of an emergency during your retreat. Your doctor's name: **Phone: Primary Emergency Contact** Name: Relationship to you: Mobile: Home phone: Work phone: **Secondary Emergency Contact** Name: **Relationship to you:** Mobile: Home phone: Work phone: VII. Health Info We ask for the following health information in the event of a medical emergency. Sakya Kachod Choling reserves the right to require any retreat applicant to submit a doctor's evaluation about the applicant's physical or mental fitness to do retreat. Sakya Kachod Choling does not have the professional capacity to provide care for persons with severe physical or mental health challenges. Most of our retreat facilities require the ability to climb steps or walk across the property, which is uneven and rugged in places. Date of Birth: Please list any prescription medications you are taking: Please list any allergies: Please describe any physical disabilities: Please describe any physical, emotional, or mental health challenges, including depression or anxiety: **Medical Insurance** (leave blank if you don't have any) **Insurance carrier name: ID Number:** Enrollment code (if applicable):

Along with this application, you must submit the required proof of Covid vaccination.

By signing below, you affirm that you have read and agree to abide by the <u>rules</u> and the <u>Covid</u> <u>policy</u> of Sakya Kachod Choling. You also agree to sign a release-of-liability form on arrival.

Retreat Applicant Signature:

If submitting this form electronically, you may sign by typing your name in the above field or inputting an electronic signature image.

For each number		For staff use only a staff member will input the date the alged completion of the step; and any a	action was taken; which staf	
Is the applican	t a friend or sus	taining supporter of SKC?		
1. Application	form and health	info received on		
received by:				
2. Application				
date:	approved	approved as modified	denied	withdrawn
completed by:				
3. Amount due	e for housing and	d meals:		
calculated by:				
4. Deposit rece	eived on			
received by:				
5. Full paymen	nt received on			
received by:				
6. Retreat conf	firmed to comm	ence on		
Name of staff r	member who wi	ll be present:		
Additional notes:				