

**Registration Form  
Mahamudra Retreat  
June 21- July 3, 2008**

Last Name: \_\_\_\_\_

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

First Name: \_\_\_\_\_

\_\_\_\_\_

Gender: Male / Female    Age: \_\_\_\_\_  
(for housing allocation only)

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

Phone: \_\_\_\_\_

Postal Code: \_\_\_\_\_

Email: \_\_\_\_\_

Country: \_\_\_\_\_

**Registration & Method of Payment**

Please mail your entire payment with your registration form. As we do not reserve places without payment, please do not fax your registration form. Please mail a check or money order payable to **Maitripa Institute**, with "Mahamudra Retreat" in the subject line. ***Please do not send cash.*** Please do not plan to arrive before July 21. ***If you cancel your registration on or before June 1, we will return your contribution, less \$50 cancellation fee. There will be no refunds after June 1, 2008.***

**In Case of Emergency:**

Contact name: \_\_\_\_\_ Phone: \_\_\_\_\_

**Liability waiver:** The following signatures indicate that participants relieve Maitripa Institute from all liabilities in the event of any injury or illness incurred while attending the Mahamudra Retreat.

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

Signed: \_\_\_\_\_

Please send completed form and payment to:

**Maitripa Institute  
Mahamudra Retreat  
1119 SE Market St.  
Portland, OR 97214**