

Contemplative Wisdom School - 2009-2010

Rev. Dr. Cynthia Bourgeault

Registration Form

Name: _____

Address: _____

_____ *Zip* _____

Home Telephone _____ *Cell Phone* _____

E-mail: _____ *Best time to reach you:* _____

The total cost is \$1350 per person; a \$650 non-refundable deposit is due with Registration. The balance of \$700 is due prior to the first Seminar, Sept 30. Enclosed is my _____ deposit. Please make all checks payable to Contemplative Outreach of Orange County and mail directly to Post Office Box 208, Cornwall, NY 12518-0208. All reservations are subject to confirmation.

If you have any special needs or limitations (stairs, dietary) please state what they are on this form and if possible, we will accommodate you. There are stairs at Bethany, and no elevator.

Special Needs: _____

Briefly describe your meditation practice(s):

Why do you want to attend this Wisdom School?

My intention is to participate fully in all three (3) Seminars of the Wisdom School. I understand that there are no refunds after the first Seminar begins, September 30, 2009.

Date: _____

Signature: _____

Sponsored by Contemplative Outreach of Orange County, New York - Cathy McCarthy, Coordinator