



Reference # _____

Sri Karunamayi
2008 Chicago One Day Retreat Registration
Saturday, June 28, 2008

Name _____ Male _____ Female _____
 (One applicant per form)

Address _____ City _____ State _____ Zip _____

Phone _____ E-Mail _____

All applications must sign to the right to register for this retreat.
 By signing, I waive all my rights to legally hold SMVA Trust, Inc.
 and/or the retreat facility responsible for any injury or damages. _____
 (Please sign above)

Payment: I would like to pay the registration fee of \$ _____ by

Check/Money Order (payable to SMVA Trust) Credit Card

MasterCard VISA American Express Diners Club

Credit Card # _____ Exp. Date _____ Today's Date _____

Billing Address _____ City _____ State _____ Zip _____

Cardholder's Name _____ Signature _____

LOCATION
Sri Venkateswara Swami Temple
Balaji Temple
1145 W. Sullivan Road
Aurora, IL 60506

Registration Fees: One Day Meditation Retreat
 \$ 95 until June 20, 2008
 \$108 after June 20, 2008
 ~ **Accommodations** are not included for one day retreats.
 ~ **Senior Citizens** (65 & older) and **students** (with I.D.)
 will get a \$25 discount on the above prices
 ~ **Refunds** through Monday, June 23 only (with \$15
 cancellation fee). No refunds after this date.

Light lunch and snacks will be provided.
 A confirmation letter with additional
 information about the retreat will be sent
 to you upon receipt of this form. Thank you.

_____ Check here if you need hotel information

For more information:
 Visit: www.karunamayi.org
 Email: Chicago@Karunamayi.org
 (773) 429-7482

Mail completed registration form to:
 Dr. Mark Johns
 P.O. Box 190
 Evanston, IL 60204

