



Reference # \_\_\_\_\_

**Sri Karunamayi**  
**2008 WASHINGTON, DC 1-Day RETREAT REGISTRATION**  
**Saturday, May 24, 2008**

Name \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_  
(One applicant per form)

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ E-Mail \_\_\_\_\_

All applicants 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 # (payable to SMVA Trust) \_\_\_\_\_ The following credit card

\_\_\_\_\_ MasterCard \_\_\_\_\_ VISA \_\_\_\_\_ American Express \_\_\_\_\_ Diners Club

Credit Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_ CVV2 Code \_\_\_\_\_  
(security code)

Billing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Cardholder's Name \_\_\_\_\_ Date \_\_\_\_\_ Signature \_\_\_\_\_

**LOCATION**

The Unitarian Universalist Church  
of Silver Spring  
10309 New Hampshire Ave.  
Silver Spring, MD 20903

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.

For more information:

Visit: [www.karunamayi.org](http://www.karunamayi.org)  
Email: [WashingtonDC@Karunamayi.org](mailto:WashingtonDC@Karunamayi.org)  
(240) 235-4204

**Registration Fees: One Day Meditation Retreat**

Until April 30: \$95 After April 30: \$108

- ~ **Accommodations** are not included for 1 day retreats
- ~ **Senior Citizens** (65 & older) and **students** (21 & younger) will get a \$25 discount on the above prices
- ~ **Refunds** through May 17 only (with \$15 cancellation fee)  
No refunds after this date.

\_\_\_\_\_ Check here if you need hotel information

Mail completed registration form to:

Diane Faulkner  
2010 Kalorama Rd., NW #54  
Washington, DC 20009

