

Registration Form

Labor Day Weekend Yoga and Meditation Retreat

Saturday, September 1 – Monday, September 3

Check-in: 9:30am Saturday. Program runs 10:30am Saturday until 1:30pm Monday

Location and Directions: http://www.medicinebuddha.org/contact_us.htm

For more information: julirice@yahoo.com or 650-996-4209 Let her know about any special needs that you may have

After you have registered and paid in full, a confirmation letter with retreat details will be e-mailed to you – A few days before the retreat.

Your Name _____

Phone H: _____

W: _____ C: _____

Address _____

Zip Code _____

E-mail _____

Room request _____ double _____ triple _____ quadruple

Name of requested roommate(s) _____