

# The *Pointing Out* Way of Tibetan Buddhist Meditation

## Registration Form 2010-2011

Clearly check appropriate box(es):

- |                                  |                         |                   |
|----------------------------------|-------------------------|-------------------|
| <input type="checkbox"/> Level 2 | Aug. 27 - Sept. 3, 2010 | Newton, MA*       |
| <input type="checkbox"/> Level 1 | Oct. 3 - 10, 2010       | Nevada City, CA   |
| <input type="checkbox"/> Level 3 | Nov. 27 - Dec. 3, 2010  | Newton MA*        |
| <input type="checkbox"/> Level 1 | Jan. 9 - 16, 2011       | Santa Barbara, CA |
| <input type="checkbox"/> Level 1 | Jan. 21 - 28, 2011      | Newton MA         |
| <input type="checkbox"/> Level 1 | Feb. 18 - 25, 2011      | New Orleans, LA   |
| <input type="checkbox"/> Level 2 | Oct. 21 - 28, 2011      | Boston, MA*       |

Name: \_\_\_\_\_ Date: \_\_\_\_\_

**\*Restricted access—participation only by invitation of teacher following your on-going practice**

**Tuition:** \$850 for Level 1 and \$900 for the Level 2 or Level 3 meditation retreats.

Send this form and a check for the full amount (payable to Daniel Brown, Ph.D.) to Daniel Brown, Ph.D. & Associates 997 Chestnut St. Newton MA 02464. Direct program inquiries to Dr. Daniel Brown (617) 244-1099; FAX 617-244-2498; danielbrownphd@comcast.net

**Refund Policy:** Full refund up to 1 month prior to course, minus a \$75 cancellation fee. Refund checks are mailed after the 1-month cut-off point prior to the course, once the course roster is finalized. **No refunds made if course is cancelled one month or less in advance of course, without exception. Cancellations requests must be received in writing by mail or FAX and refund amount based on date of receipt.** Please do not call with reasons for last minute cancellations. Since the course is a week-long, it is very difficult for people on a waiting list to cancel work at the last minute to fill a vacancy, so please don't request our staff to do this extra work. If you cancel late, it is likely that the seat will go unfilled.

**Locations: Samadhi Yoga Center** 796 Beacon St. Newton MA (617-243-0034) Hotel and B&B information provided upon request.

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

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

\_\_\_\_\_

\_\_\_\_\_

E-Mail: \_\_\_\_\_

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

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

Profession/Discipline: \_\_\_\_\_

Present Employment: \_\_\_\_\_

Previous Meditation Experience: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

updated 10.14.10