

Chapel Hill Zen Center Newsletter — Jan & Feb, 2019

For more information, visit www.chzc.org/events.htm#sesshin

Genzo-e Sesshin Registration Form March 1-6 — Applications Due February 15

Name _____ Phone _____

Address _____

E-mail _____

Emergency contact person: Name _____ Phone _____

Liability waiver: *prior to sesshin, you will be required to sign a waiver whereby you release the Zen Center from any liability for accident or injury, and agree not to sue. You may request a copy of the form in advance.* Do you have a **medical condition** (e.g., diabetes, heart condition, pregnancy) or **dietary restrictions**? If so, please attach a short statement of explanation:

Do you need a chair? Full time Part time

I have an oryoki I can bring Yes No

I plan to arrive at _____ on _____ I plan to leave at _____ on _____

I can help set up (4:00 P.M.—6:00 P.M.) I can help clean up

I have enclosed my deposit/sitting fees \$ _____

I would like to donate toward a scholarship fund \$ _____

If this is your first sesshin with the Chapel Hill Zen Center, please attach a short statement about your zazen practice and history: How long have you been sitting zazen? How often are your currently sitting? Have you sat a one-day sitting or longer sesshin before? If so, when and with whom?

Do you have room in your home for someone from out of town to stay? Yes No

Where do you plan to sleep?

Checks payable to
Chapel Hill Zen Center
P.O. Box 16302
Chapel Hill, NC 27516