**2017 CHINESE NEW YEAR BLESSING CEREMONY**

 **CUM PERSONAL RETREAT**

**丁西年新春吉祥祈福会兼个人禅修活动**

**Date: 30th January 2017 (Monday) (3rd day of the first lunar month)**

**Time: 8.30 a.m. to 5.00 p.m.**

**日期: 二零一七年一月三十日（正月初三） （星期一）**

**时间：早上八点半至下午五点正**

**Registration Form (报名表格)**

**Closing Date截止日期*: 31.12.2016***

**Personal Details个人资料**

|  |  |  |  |
| --- | --- | --- | --- |
| Name 姓名\* | English / 中文: | Age 年龄 |  |
| Marital Status婚姻状况\* | [ ] Single [ ] Married  |
| Languages/Dialect Spoken\*沟通语言 | [ ]English英文 [ ]Mandarin 华文[ ]Hokkien 福建 [ ]Others 其他, specify:\_\_\_\_\_\_\_\_\_\_\_\_\_\_(select whichever is applicable 选择任何相关的) |
| Contact No联络电话\* | H/P 手机: Home住家: | Profession 职业\* |  |
| Address地址\* |  | Email 电邮\* |  |

**Personal Retreat**

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| Do you intend to join the Personal Retreat immediately after the Chinese New Year Blessing Ceremony?是否有意愿在新春吉祥祈福会结束后参与个人禅修活动？ | [ ]No否[ ]Yes 是， \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**Accommodation**

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| Do you require accommodation? 是否需要住宿？(Regardless of whether you are joining the CNY Blessing Ceremony only or both the CNY Blessing Ceremony and personal retreat)（不管您是否只参与新春吉祥祈福会或者新春吉祥祈福会以及个人禅修活动） | [ ]No否[ ]Yes 是， \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**Your Practice (For Personal retreatants only)**

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| How many years have you been practicing Buddhism & Meditation?\*您修习佛法和禅修多少年了? |  |
| Please State Type of Meditation Technique and Meditation Teacher.\*请说明您至今使用什么禅修方法和指导老师 |  |

**Medical Information健康状况**

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| --- | --- |
| Please State Medical Conditions (IF Any) Eg. High Blood Pressure, Kidney / Heart Problems, Asthma, Diabetics, Etc.\*是否有任何疾病？如高血压、肾/心脏问题、哮喘、糖尿病等 | [ ]No否[ ]Yes是, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |
| Are You Under Any Medication? If Yes, Please Specify Types of Medication.\*是否有摄取任何药物？如有请说明是什么药物 | [ ]No否[ ]Yes 是， \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**Emergency Contact Person紧急联络人**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name 姓名 |  | Relationship 关系 |  | Contact No. 电话 |  |

**Transportation Arrangement交通安排**

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| --- | --- |
| Do you need us to arrange transportation?If yes, please state the point of pick-up and time.您是否需要我们安排交通接送？如需要请说明接送的时间和地点。 | [ ]No否[ ]Yes是, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| --- |
| Notes 备注：1. Please submit this form via email at appamadavihari@gmail.com

填妥报名表格后请将表格电邮至：appamadavihari@gmail.com 1. For enquiry/emergency during the event/retreat, please contact Sis Ai Poh (012-4938277) /

 Sis Siew Ling (019-4800280) or email us.如有任何疑问或禅修期间有任何紧急事件，请联络爱宝(012-4938277) / 秀玲（019-4800280）或发电邮给我们。 |