**Registration Form**

Please read the details before completing this application form.

Please return the completed form to Bodhinyana International Foundation Limited (refer to Registration Method as attached)

**Personal Particulars: (\*Required)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Full Name in Block Letter (As shown in Passport/ HKID)\* | | | | Full Name in Chinese (if applicable) | |
| Gender\* M / F | | Passport/ HKID (First 5 digits only for HKID cardholders. e.g. A1234XX)\* | | Occupation\* | |
| Mobile Telephone No.\* | | | Email Address\* | | Religion |
| Residential Address: |  | | | | |
| Emergency Contact\*  Person Name and Tel |  | | | | |
| What motivates you to join this retreat & what is your expectation? |  | | | | |

***Declarations:***

I, the undersigned hereby declare that the above information is true. I am also willing to abide by the organiser/meditation instructor’s advice and the rules and regulations of the workshop. Otherwise, I will have to leave the workshop as instructed by the organiser/ meditation instructor. I hereby agree and accept that neither the organizer nor the management of Bodhinyana International Foundation Limited shall be held liable in the event of any injury (mental or physical), losses or damages occurred during this workshop.

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

(Name in BLOCK LETTERS: )

**Day of Kindfulness**  **HK$200** (including light vegetarian lunch)

**Voluntary Donation##** (Your generous donation would help covering living expenses for our venerable teacher. Individual retreat fee only covers the cost of event including food, rental of equipment and venue shared by all participants.)

🞏 HK$100 🞏 HK$200 🞏 HK$500 🞏 HK$1,000 🞏 Others (Please specify)： \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**##Note: Donation receipt will be issued only for donation in the amount of HKD100 or above**

**Name used for issuance of Donation receipt** (if different from above) :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Total Amount : HKD\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |  |
| --- | --- | --- |
| Enquiries: | **Contact Person** | **Email** |
| Bodhinyana International Limited | Ms. Della Chiu | [bifasia@gmail.com](mailto:bifasia@gmail.com) |

**Registration Method:**

**By POST**

Please complete this Registration Form together with a crossed cheque/ bank pay-in slip and submit by POST to

**Bodhinyana International Foundation**

**Room 1108 11/F Tower 3**

**Phase 1 Enterprise Square**

**9 Sheung Yuet Road Kowloon Bay  
Kowloon Hong Kong**

***Attn. “BIF – Retreat Appln”***

Please issue a crossed cheque in FULL amount, payable to: **“Bodhinyana International Foundation Ltd.”##**

##Please double check spelling; we have received many returned cheques due to incorrect payee name.

***Or* By FAX *or* EMAIL**

Please scan the complete Registration Form (pdf) with the bank pay-in slip (pdf) and send by FAX (852) 3747 7155 or by EMAIL to bifasia@gmail.com

**Bank Account Details**

Bank Name: Bank of East Asia 東亞銀行

Account No.: 015-220-25-10580-6

Account Name: Bodhinyana International Foundation Limited (覺智國際基金會有限公司)

We will acknowledge the receipt of your application via email and if it is not successful, we will return the cheque or refund in full to you. All payments are non-refundable with changes and cancellation after confirmation.

By signing below, I, for the purpose of the Personal Data (Privacy) Ordinance, consent that the personal information collected or held by the Bodhinyana International Foundation Limited (whether contained in this Form or otherwise obtained) may be used by or disclosed to individuals or an organization within or outside Hong Kong for the purpose of the accommodation booking & etc. and will be treated in confidential manner and not be disclosed to any other party.

🞏 Please check if you wish us to use your personal information to inform you of upcoming events.

**Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**(Please Print Name )**

**Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Opting out**  If at any time you would like BIF to remove your personal information from our records, please contact us at bifasia@gmail.com.  Please note that you may no longer receive updates, announcements, or invitations to events if we remove your personal information.