

Zen Practice and Bodhisattva Vows Retreat

Registration Form

Guest Teacher Tenshin Reb Anderson Roshi
Wednesday, April 30 at 7 p.m. - Saturday, May 3 at 5 p.m.
At the Minnesota Zen Meditation Center
Participants must attend the entire retreat.

Name : _____

Street address : _____

Phone number: _____

Emergency contact name and phone number: _____

Membership (check one):

- Dharma Field Zen Center Compassionate Ocean Dharma Center
 Clouds in Water Zen Center Minnesota Zen Meditation Center Not a member

Payment enclosed (check one):

- Check made out to MZMC (Preferred)
 Credit Card (Surcharge 3%; please call MZMC at 612-822-5313)

\$150 for members of one of the centers listed above; \$180 for non-members

Do you have retreat experience? _____

Do you have any food allergies? _____

Will you be sleeping at MZMC? _____

Will you be bringing your own oryoki bowls? _____

Will you sit in a chair or on a cushion? _____

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Center