

**Dharma Yatra Booking Form 2010**  
**July 22<sup>nd</sup> - August 1<sup>st</sup>, 2010**

Name.....Sex M / F    Age.....

Address(e).....  
..... COUNTRY .....

Email: (Please write clearly).....

TEL no..... Emergency tel. no (relative/close friend).....

Spoken language(s) : .....

Are you bringing any children under 16yrs of age?: Yes [ ]    No [ ]  
If Yes: How many [ ] Please write: Name, M/F, age and languages(s) spoken  
.....

Registration fee has been paid by: Cheque [ ]    Credit Card / PayPal [ ]    Bank Transfer [ ]

Please note that it will **not** be possible to arrive after the 22<sup>th</sup> or to leave before the 1<sup>st</sup>.

Do you have any special diet ? (Note that food during the Yatra is vegetarian, we can cook vegan, gluten free)  
Please mention what you can't eat  
.....  
.....

Mention your previous meditation experience, dates, teachers, etc  
.....  
.....  
.....

All of the following information will be kept confidential.  
Are you currently using any medication? Please specify condition and treatment.  
.....  
.....  
.....

Have you ever suffered from psychological illness, depression, anxiety, or had suicidal tendencies? Please specify dates and treatment  
.....  
.....  
.....

Are there any factors you would like to communicate to us concerning your current personal situation?  
.....  
.....  
.....

I accept                    my email address to be transmitted to the other participants after the Yatra  
I don't accept  
(indicate your choice)

I undertake to follow the guidelines of Dharma Yatra, and I will take full responsibility for myself and my actions during participation in any activities of the Yatra association.

Signature .....Date.....

Please complete this form and return it to: **Yatra** c/o Muriel Bansard  
3 Place Saint Roch  
61110 Rémalard  
Tel: +33 (0)2 33 25 54 76