

**A Retreat with Ayasma Aggacitta at  
Sasanarakkha Buddhist Sanctuary Retreat Centre**  
*conducted in Hokkien*

Date : **16 - 23 Apr 2017**

**Application Procedures**

1. Complete the attached application form (which is also downloadable from [www.sasanarakkha.org](http://www.sasanarakkha.org)). For **first-time applicants\***, remember to attach a passport sized photo on the form. Then,

**EITHER:**

- a) mail the completed form (by **ORDINARY MAIL**) to:

**HMR1 Co-ordinator  
c/o 28 & 30, 1<sup>st</sup> Floor,  
Jalan Medan Taiping 4,  
Medan Taiping,  
34000 Taiping,  
Perak, Malaysia.**

**OR:**

- b) email the completed form to [rc@sasanarakkha.org](mailto:rc@sasanarakkha.org)

Application forms will **not** be processed if they are:

- i) incomplete (i.e. missing required information, e.g. email)
- ii) illegibly filled out

2. Once your form is received at the specified address, we shall acknowledge receipt via email. Thereafter, all correspondence will be done through email. If you do not get any response 2 weeks after sending your application form, kindly send the HMR1 Co-ordinator, Bro. Tioh, an email ([rc@sasanarakkha.org](mailto:rc@sasanarakkha.org))

3. **Selection Criteria:** Only yogis who **can converse in Hokkien** are qualified to apply for this retreat. If you need a Hokkien translator, you do not qualify for the retreat.

Priority will be given to applicants

- i. who can speak Hokkien and not English
- ii. are/were supporters of SBS or Ayasma Aggacitta
- iii. attending the full retreat

4. **Period of stay:**

- i. All participants must begin their retreat on **16 April 2017**.

5. **For enquiries**, please contact the HMR1 Co-ordinator, Bro. Tioh. You can either:

- i. send him an email ([rc@sasanarakkha.org](mailto:rc@sasanarakkha.org))

**Please note:**

1. Use your full name as per NRIC when filling out your form.
2. In addition, write your nickname within parentheses after your full name, e.g. (Andrew, Ah Choo, Ah Hong).
3. Use your name as stated in 1 & 2 above when corresponding with the HMR1 Co-ordinator.

4. Please check your e-mail from time to time, or request someone to do so for you, so that you can get the latest info.
5. **Closing date** for application is **15 Mar 2017 or when application is full**

Your co-operation in reading all the info in this mail and following the application procedures is highly appreciated.

Thank you & Sadhu.

**\*Applicants who have attended past Hokkien Meditation Retreats conducted by Ayasma Aggacitta do not need to attach their photos.**



**Sāsanārakkha Buddhist Sanctuary, Taiping, Perak**  
**Hokkien Meditation Retreat conducted by Āyasmā Aggacitta**  
 16 – 23 April 2017

*Attach photo here*

Required of applicants unknown to Āyasmā Aggacitta only

## Application Form

**Important reminders:**

- a) Priority is always given to yogis who apply for the full retreat.  
 b) Application forms that are not filled out completely will be rejected (especially those without a valid email and/or a photo).  
 c) If you do not get any response two weeks after posting this form, send an email to Bro. Tioh (E: rc@sasanarakkha.org)

1. Full Name: (as per NRIC followed by nickname)	2. Age:	3. Gender: <input type="checkbox"/> Male (Please √) <input type="checkbox"/> Female
4. Correspondence address:	5. Tel no.: (Give at least one no. that can <b>easily reach you.</b> ) a. Home: b. Mobile:	
6. Email: [ <b>REQUIRED: write clearly</b> esp. the upper & lower case, the 0 (zero) & o (letter 'o'), the – (dash) & _ (underscore)] <sup>1</sup>		7. Can you converse in Hokkien? <input type="checkbox"/> Yes <input type="checkbox"/> No (Please √)
8. In what way have you helped or supported SBS or Āyasmā Aggacitta?	9. Period of stay <sup>2</sup> (Please √): <input type="checkbox"/> 16 – 23 April 2017	
10. Do you have any chronic mental or physical illness or disability? (Please √) <input type="checkbox"/> Yes (Please elaborate below) <input type="checkbox"/> No		11. Previous retreat experiences:
<i>Teacher</i>	<i>Type</i>	<i>Duration &amp; Year</i>
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**Next of kin to be contacted in case of emergency:**

Name:	Telephone no.:	Address:
	Home:	
Relationship:	Work: Mobile:	

I hereby declare and acknowledge that:

- The particulars given in this form are to the best of my knowledge **true and correct**.
- I shall try my best to follow the rules and regulations of SBS insofar as they affect me as a participant.
- I shall not hold SBS Management Committee or Sangha or the Meditation Teacher liable for any mishap due to my own action or negligence during my stay in SBS.
- SBS reserves the absolute right, in exceptional circumstances, to require a resident to leave SBS at 24 hours notice. This right shall be exercised in the best interests of SBS.

**SIGNATURE**

**DATE**

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Please check to make sure you have filled up the form **correctly and completely**, then send it to

**HMR1 Co-ordinator**  
 c/o 28 & 30, 1<sup>st</sup> Floor,  
 Jalan Medan Taiping 4,  
 Medan Taiping,  
 34000 Taiping,  
 Perak, Malaysia.

**Closing date: 15 Mar 2017**

*\*Your application **will not** be processed if your handwriting is illegible.*

1 If you do not use email please indicate an email address of someone close to you.  
 2 All participants are required to observe 8 Precepts.