Pema Osel Ling Personal Retreat Request Questionnaire

Name

Current Address

Email Address

Phone Number

Retreat dates requested

Retreat conditions: Private or Semi-Private (shared bathroom and kitchen)

Root lama or lama from whom you have received Refuge Vows or empowerments

Is a lama/teacher guiding your retreat or is it self-guided?

Focus of your retreat:

Have you done retreat before, either public or group, and if so how long and where?

Do you have any health conditions?

Do you have a shopper or support person?

Do you have your own personal transportation?

How did you hear about Pema Osel Ling, and have you been here before?

Are you a member of the Vajrayana Foundation or our Ngondro Program?

Vaccination status: