

VISITOR REGISTRATION

All overnight visitors should fill out this form. One form suffices for one family or party except in the case of practice retreatants. Please write clearly in English or Burmese. A Burmese version of this form is available.

Name **Ordination and date (if any)**

Gender (M / F) **Age**

Other visiting members of your family or party
(participants in practice retreats must register separately).

Dates of Stay **Event or purpose of stay**

Special requirements

Email Address

Phone number **Cell / land line**

Home Address

Emergency Contact

Name

Phone or Email Address

Relation to Visitor

Car Make, Year, License Plate

Office Use

Assigned Room **Comments**