

Application
Embracing Change series with Peter Williams
Thursdays, Jan. 25th – March 22nd, 2018 (Skips Feb. 8)
YWCA, 2222 14th St., Boulder, CO

Two ways to apply:

1. Paper: Mail this signed form with your deposit (checks payable to “Peter Williams”) to: Peter Williams, 1634 Walnut St., Suite 221, Boulder, CO 80302
2. Electronic: Make your deposit via the Paypal link on Peter’s homepage <http://www.truehomewithin.net> and email signed form to <ptrwillms98@gmail.com>.

Peter will hold all information below in confidentiality.

Name: _____ Phone: _____

Email: _____

Address: _____

Emergency contact name and phone _____

Your donation amount for the full series (Suggested amount is \$145) _____

The suggested donation is a guideline. To match your finances, you may *need* to give less or *want* to give more. I appreciate whatever you are able to contribute.

The payment is **non-refundable** if you are accepted and decide to join the program. You will get a full refund if not accepted into the program.

Participant Waiver: I understand that I am wholly responsible for my health and safety for the duration of the program, from its advent to close, and hereby hold harmless Peter Williams (Organizer) and YWCA Boulder County (Owner), where classes are held, from any liability whatsoever resulting from my participation. I agree not to hold the Organizer or Owner responsible or liable in the event of any accident, illness (mental or physical), loss of personal belongings, physical injury or emotional distress resulting from my participation in this retreat. I understand that I am fully responsible for obtaining any necessary medical treatment should any accident, illness or discomfort arise during any part of the program.

Signature: _____ **Date:** _____

-----Questionnaire-----

- Regular attendance will strengthen the sense of community in the group. Are you able to attend regularly?

- Please say a little about why are interested in this group and what you hope to get out of it.

- Please describe your meditation experience: Years of practice, current daily practice and approximate number of silent meditation retreat days.

- Do you have any physical conditions or special needs that you want Peter to know about? The YWCA is accessible to all.

- Please describe any significant life stressors or mental health challenges and how they might affect your participation in the program.