

REGISTRATION FORM - MARE CHAPMAN, LLC

**Insight Meditation: Women's Retreat**  
**DEEPENING TRUST IN OURSELVES**

December 14-16, 2018

Holy Wisdom Monastery, Middleton, WI

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State: \_\_\_\_\_ Zip \_\_\_\_\_

Email (print clearly) \_\_\_\_\_

Phone \_\_\_\_\_

Describe your previous retreat experience:

\_\_\_\_\_

I am registering for:

\_\_\_\_\_ Base fee - \$180.00

\_\_\_\_\_ Residential - single room = \$150.00

\_\_\_\_\_ Residential double room = \$90.00

Please tell us your roommate (if you know): \_\_\_\_\_

\_\_\_\_\_ I'd like to add a donation of \$ \_\_\_\_\_ to help with scholarships for the retreat.

\_\_\_\_\_ **Total fees enclosed\* = \$ \_\_\_\_\_**

\_\_\_\_\_ I will bring my own meditation cushion/bench.

\_\_\_\_\_ I will use a chair provided by HWM.

**Send completed Registration Form and fee (\*make check out to Mare Chapman):**  
**Mare Chapman, M.A. / Lives Unlimited**  
**715 Hill Street, Suite 200 Madison, WI 53705**