

Sesshin Guest Application Please complete and return by email to info@korinji.org

I HEREBY REQUEST TO BE A GUEST AT KORINJI DURING SESSHIN

Which Sesshin or Retreat? (Month	<u>/Year):</u>	/		
☐ I am applying for Dai-Sesshin (7	day sesshin)			
☐ I am applying for a Zen Life Retr	eat (the annual 4 d	ay beginner's retre	eat)	
If applying for Dai-Sesshin:				
☐ I wish to join the full event				
☐ I wish to apply for partial attend	ance as follows (p	ease specify the da	ates when you wish t	o arrive and depart):
For all sesshin:				
☐ I wish to be a guest in the mona	stery residence			
☐ I will arrange my own sleeping a	ccommodations in	the area (please in	quire for special hoto	el rates in town).
☐ [Seniors or persons with physica	l limitations preclu	ding the usual sess	shin daily schedule] I	wish to apply for a modified
sesshin daily schedule, to be determined	mined in consultat	on with the abbot.		
Personal Info:				
Last Name:	First	Name:		Middle Initial:
Street Address:			Apt	. #:
City:	State	:	Zip/Postal Code:	
Country:				
Tel: ()	Emai	l:		
Date of Birth: (mm/dd/yy) /	/		Sex:	
# of years Zen practice:	Current Zen	eacher (if any):		

General Questions:

1. What experience do you have in Zen, other Buddhist, or other formal meditation practice? Please list the names of your teachers (past and current) and how long you have studied with them.

•	Are you currently receiving treatment for depression, attempted suicide, chronic pain, an eating disorder, disorder, obsessive-compulsive disorder, substance abuse, or any mental, psychological, or emotional disorder? describe.
3.	Are you currently receiving any medical treatment or prescription medication? Please describe.
4.	Do you have any food or other allergies? Please describe.
	Do you have any other physical or mental condition, that could possibly limit your participation in sesshin at including participation in physical work, extended periods of meditation, minimal sleep, residence and sleep in uarters with others, etc.? Please describe.
	During your time at Korinj, you will be required (regardless of past experience) to practice according to the tions of our abbot or other invited teachers. If you currently have a Zen or other Buddhist teacher, have you d that person of your intention to attend sesshin here, and do you have permission to do so?
7. traininį	If you have prior Zen practice experience, please indicate the Zen practice method(s) you currently use in your g (e.g. breath-counting, koan practice, shikantaza, etc.).
<u>Donati</u>	on:
offerin	is a private monastic residence, not a business. We do not charge fees. We suggest that you instead make gs to The Korinji Foundation—a not-for-profit charity—in the amounts below. No one will be turned away for all reasonsif you cannot make the suggested donation, please let us know.
•	7-day Dai-Sesshin Full Attendance: \$425 Dai-Sesshin Partial Attendance: \$60/day Zen Life Retreat beginner's sesshin: \$250 (no partial attendance)
	ill submit a donation via PayPal before arriving (The Korinji Foundation PayPal address: info@korinji.org), in the ount of:
	ish to additionally donate to The Korinji Foundation scholarship fund, supporting those who are unable to make offering, in the amount of:

Waiver of Liability and Hold Harmless Agreement, and Other Terms:

I understand that events and activities at Korinji involve strenuous traditional Buddhist training, including the possibility of 10 hours or more of formal meditation practice per day, and with minimal periods permitted for rest or sleep. I understand that participants may receive sharp verbal correction, and may be invited to receive blows from the keisaku stick (used to dispel stiffness and sleepiness during meditation). I also understand that private meetings with the Zen teacher may, in some instances, be monitored or recorded; such recordings are for the protection of both parties, and will not be kept indefinitely. I understand that Korinji is a rural property, with possible hazards including rugged walking conditions, noxious plants such as poison ivy, and the possibility of contracting tick- or mosquito-borne illness.

REGARDING COVID 19 AND OTHER CONTAGIOUS DISEASE: The Korinji Foundation cannot guarantee that its residents, volunteers, partners, guests, or others in attendance at events or activities will not become infected with COVID-19 or other contagious diseases. The health of all attendees, which may include elderly persons and others at risk, is our priority. The following guidelines will be enforced.

Four categories of concern are specified. Persons who fall under #1 below will not be permitted to enter the monastery grounds. Persons who fall under categories #2-4 must consult with Korinji before arriving, to determine if entering the monastery is permitted:

- 1. Individuals who test positive for Covid-19. TESTING REQUIREMENT: Korinji requires event attendees to test for Covid-19 within 24 hours before departing for travel to the monastery.
- 2. Individuals who are experiencing any symptoms of illness such as fever, cough, and shortness of breath among others.
- 3. Individuals who have traveled at any point in the past fourteen (14) days to a place that is experiencing sustained community spread of contagious disease.
- 4. Individuals who believe that they may have been exposed to contagious disease, or have been diagnosed with such, and are not yet cleared as non-contagious.

Duty to self-monitor: Event attendees further agree to self-monitor for signs and symptoms of disease while at Korinji, and to notify staff there immediately if they experience any symptoms of any illness.

I hereby certify that I understand and agree to abide by these guidelines.

REGARDING INSTRUCTIONAL MATERIAL AND CONFIDENTIALITY: I understand that some instruction given at Korinji is proprietary and confidential rather than public, in order to ensure that it is only transmitted by fully qualified teachers, and to protect students from accessing it before they are prepared to safely use it. I agree not to instruct, transmit, reproduce, or share by any means, in whole or part, any of the instructional material, practices, documents, or training to which I am exposed at Korinji, without first obtaining express permission from the Korinji abbot.

REGARDING COMMUNITY POLICIES: I understand that Korinji has established community policies including a Harassment Policy (including grievance procedure), a policy governing Teacher-Student Relationships, and a policy defining Ordained and Teacher status, and that these are available for me to read in the Korinji office.

In accordance with these understandings, and in consideration for participation in this activity or event at Korinji and other valuable consideration, I hereby release, waive, discharge and covenant not to sue the Korinji Foundation, its Boards of Directors, the Shareholders, officers, servants, agents, employees or any landowner of any premises where the event or activity takes place (hereinafter referred to as RELEASEES) from any and all liability, claims, demands, actions and causes whatsoever arising out of or related to any loss, damage, or injury, including death, that may be sustained by me, or to any property belonging to me, whether caused by the negligence of the releasees or otherwise while participating in such event or activity, or while in, on or upon the premises where the event or activity is being conducted or in transportation to and from said premises. In signing this release, I acknowledge and represent that I have read the foregoing Waiver of Liability and Hold Harmless Agreement and Other Terms, understand it, and sign it voluntarily as my own free act and deed; no oral representations, statements or inducements apart from the foregoing written agreement, have been made; I am at least 18 years of age and fully competent (or am the legal guardian of the applicant if applicant is under 18 years of age); and I execute this release for full, adequate and complete consideration fully intending to be bound by the same. I understand that Korinji may deny participation to applicants for any reason, stated or unstated, and may also terminate the participation of any person at any point without stated reason and in its sole discretion and without refund. I attest that the information I have provided above is true and I accept all terms stated herein.

Signature of			

Date (mm/dd/yy): / /