



**“An Integrated Darshana: Creation and its Causes in the Context of God Speaks, Infinite Intelligence, and Other Major Dictations of Avatar Meher Baba”**

SATURDAY, September 16<sup>th</sup> through SUNDAY, September 24<sup>th</sup>, 2023

**Registration Form**

We invite you to make a reservation now with a 10% deposit. The balance will be due by September 1st, 2023. To register send in this form along with the signed **Liability Statement** indicating your meal preferences and arrival/departure day & time. *We look forward to seeing you!*

**Requested Donation for Nine-Day Study Program is \$285 per person (includes all lunches, 1 dinner, tea and coffee.)**

<u>Name</u>	<u>Cost</u>	<u>Meherana Tent*</u>	<u>Meherana Futon*</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**\*Note:** Please add \$12.50 per tent. \$12.50 is for the use of one tent for the nine-day course no matter what size or how many people sleep in the tent (i.e. each person does not need to pay \$12.50). Futons are \$7.50 each. If you bring your own tents and futons there is no additional charge.

**Address:** \_\_\_\_\_

**Phone** (h) \_\_\_\_\_ (w) \_\_\_\_\_ (cell) \_\_\_\_\_

**Email** \_\_\_\_\_

I would like to help sponsor someone who can't afford the requested donation. Enclosed is \$\_\_\_\_\_ for this purpose.

**10% Deposit to hold Reservation - \$28.50 each. Balance Due September 1, 2020 - \$256.50 each**

Total 10% Reservations	\$ _____
Total Balance due	\$ _____
<b>TOTAL REGISTRATION</b>	<b>\$ _____</b>

Mail your registration to **Meherana**, P.O. Box 1997, Mariposa CA 95338

Please make your check payable to **Meherana** or fill in the info below to pay by credit card:

Card # \_\_\_\_\_

Expires \_\_\_\_\_ Billing Zip Code \_\_\_\_\_

\_\_\_\_\_  
Name (as it appears on account)

Signature \_\_\_\_\_

Paypal: Enter [donations@meherana.org](mailto:donations@meherana.org) and the funds will come to Meherana



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**LIABILITY STATEMENT**

I/we agree to release and hold Meherana, Inc. harmless from any and all liability in the event of an accident. All persons using the premises assume the risk of injury to themselves and/or their children. I/we further agree to indemnify Meherana for any attorney fees and/or costs involved in defending itself from any actions for injury occurring on the premises.

I grant Meherana, Inc. permission to act in whatever way necessary to care for me and/or my children in case of emergency, including permission for me and/or my children to receive medical treatment.

**Please Note:** All attendees must be listed under registration. All attendees 18+ must sign below. Attendees under 18 must have the signature of a parent or legal guardian.

Signature of Attendee or Responsible Party	Date

Signature of Attendee or Responsible Party	Date

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Special medical or other needs: \_\_\_\_\_

**Meals:**  Vegetarian Meals    Non-vegetarian Meals    Gluten Free

Please indicate when you will arrive and if you need a tent or futon. Thank you!

I /we will arrive on \_\_\_\_\_ at \_\_\_\_\_  
DateTime

I /we will depart on \_\_\_\_\_ at \_\_\_\_\_  
DateTime

Tent Needed? # \_\_\_\_\_   Futon Needed? # \_\_\_\_\_

Tents and futons are in limited supply. If we are unable to grant your request, we will email you.