

Application for a Dedicated Practitioner's Group
with Peter Williams
February to May 2025

Applications are due January 23rd. There are two ways to apply:

- Electronically: 1. Fill out and sign this form and email it to Peter at <ptrwllms98@gmail.com>. 2. Make the first of two payments using the "Make a Donation" button here: <http://www.truehomewithin.net/>.
- Paper: Mail to Peter at PO Box 351, Niwot, CO 80544, the following:
 - A. This filled out and signed form
 - B. Check for your first payment, payable to "Peter Williams."

Name: _____ Phone #: _____ Email: _____

Address: _____

Emergency contact name, phone, email:

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 the property where the program is based - Kelly's Barn for in-person participants (Owner), Peter William's home for online participants (Owner) - from any liability whatsoever resulting from my participation in the program and any of its events. I agree not to hold the Organizer or Owners responsible or liable in the event of any accident, illness (mental or physical), loss of person I belongings, physical injury or emotional distress resulting from my participation in this program. I understand that I am fully responsible for obtaining any necessary medical or mental health treatment should any accident, illness or discomfort arise during any part of the program.

Signature: _____ **Date:** _____

Your total *dana* (donation) pledge. (Suggested: \$675 in person / \$590 online) _____

The suggested amounts are just a guideline. You may *want* to give more or *need* to give less. I turn no one away due to cost.

Dana Installments

The pledge is given in 2 payments. A payment = Your pledge / 2. Payments are non-refundable once you have joined.

Payment amount due January 19 _____

Payment amount due March 10 _____

I will attend: _____ In-person on Monday eves. _____ Online on Wednesday eves.

Please fill out these questions if you have not done a group or retreat with Peter in the last 12 months.

Peter holds all information in confidentiality.

- Please describe what interests you in joining this dedicated group.

- Please describe your meditation experience level: How long you have been practicing, your current daily practice, and approximate number of silent meditation retreat days.

- The group is its participants. The regular practice and attendance of members enables the group to support deeper practice and community. Are you able to:

Practice regularly (whatever that means to you)? _____
Attend the weekly evening meetings regularly? _____
Attend the 3 daylongs (Saturdays, 2/ 22; 4/12; 5/10)? _____

- Do you have any physical conditions or special needs that that may affect your participation in the group?

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