



## ~PRESENT TO DYING~

### ***A COMMUNITY-BASED CONTEMPLATIVE CARE PROGRAM FOR BEGINNERS***

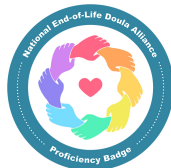
PLEASE COMPLETE THE FOLLOWING REGISTRATION FORM AND RETURN TO THE FOLLOWING ADDRESS: HOSPICE WITHOUT BORDERS, 1713 STATE AVE NE, OLYMPIA, WA 98506. ALTERNATELY SCAN AND EMAIL TO: DAVID@HOSPICEWITHOUTBORDERS.COM.

PLEASE NOTE THAT WE ONLY HAVE 12 SPACES AVAILABLE FOR THE 2025 COURSE. IF YOU WANT TO ENROLL FOR APRIL 2025, **WE ENCOURAGE YOU TO RETURN THE COMPLETED REGISTRATION AS SOON AS FEASIBLE.** IF YOU DO NOT GET INTO THIS YEAR'S COURSE, WE WILL CONTACT YOU AND YOU CAN CONSIDER REGISTERING FOR OUR SPRING COURSE IN 2026. PLEASE CONTACT AT US AT 360-556-4974 OR EMAIL AT [INFO@HOSPICEWITHOUTBORDERS.COM](mailto:INFO@HOSPICEWITHOUTBORDERS.COM) IF YOU WOULD LIKE ADDITIONAL INFORMATION.

THE 4 SATURDAYS FOR THE 2025 RETREAT ARE: APRIL 5, APRIL 12, APRIL 19, APRIL 26

NOTE: THAT PRESENT TO DYING IS HELD IN PERSON AT THE OLYMPIA FIG, RELATIVELY INTIMATE SPACE. BECAUSE OF THIS AND OUT OF AN ABUNDANCE OF CAUTION AND CARE FOR OUR FELLOW COUNSELORS, WE REQUEST THAT ALL PARTICIPANTS ARE VACCINATED AGAINST COVID 19, AND OR ARE WILLING TO WEAR A MASK.

NAME	
PREFERRED PRONOUN	
MAILING ADDRESS	
PREFERRED EMAIL	
PREFERRED PHONE	
PLEASE SHARE WHY YOU ARE ENROLLING IN THIS COURSE?	
PLEASE SHARE WHAT YOU'RE HOPING TO	





ACHIEVE BY PARTICIPATING IN THE COURSE		
HAVE YOU HAD ANY EXPERIENCE IN CARING FOR A DYING PERSON,.		
IF YOU HAVE EXPERIENCED THE DEATH OF A FRIEND, FAMILY MEMBER OR PERSON OTHERWISE CLOSE TO YOU IN THE PAST 12 MONTHS PLEASE TELL US ABOUT THAT.		
ATTESTATION	I DO AFFIRM THAT THE ALL THE INFORMATION SHARED ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE. I ATTEST THAT I HAVE BEEN VACCINATED AGAINST THE COVID-19 VIRUS, AND OR I HAVE A MEDICAL ~ SPIRITUAL/EXISTENTIAL REASON FOR NOT BEING VACCINATED, AND AS SUCH I AM WILLING TO WEAR A MASK DURING THE RETREAT IF REQUESTED TO DO SO.	
SIGNATURE & DATE		DATE:

**PAYMENT METHODS**

- SUGGESTED RETREAT CONTRIBUTION IS \$80. (GIVE WHAT YOU FEEL COMFORTABLE GIVING).
- PAYING BY CHECK: MAKE YOUR CHECK PAYABLE TO: **HOSPICE WITHOUT BORDERS**
- PAYING BY CASH: PLEASE BRING CASH WITH YOU THE MORING OF THE 1<sup>ST</sup> SESSION OR DROP IN AN ENVELOPE IN OUR MAIL DROP AT 1713 STATE AVE NE, OLYMPIA, WA 98506 IF YOU'RE IN THE OLYMPIA AREA.
- PAYING BY CREDIT/DEBIT CARD: IF YOU PREFER YOU CAN MAKE YOUR RETREAT CONTRIBUTION AT OUR WEBSITE USING ANY OF THE DONATE BUTTONS.
- PAYING AT OUR FUNDRAISER/EVENTS OR STORE IN OLYMPIA: REGISTER TODAY!

IF CONTRIBUTING ONLINE VIA OUR WEBSITE, PLEASE NOTE AMOUNT CONTRIBUTED & DATE HERE: \_\_\_\_\_



