

# APPLICATION TO STAY AT SANTI FOREST MONASTERY -MONASTICS ONLY-

Please fill in all fields and return to us.

100 Coalmines Road, PO Box 132, Bundanoon, NSW 2578, Australia  
+61 2 4883 6331 [santiguest@gmail.com](mailto:santiguest@gmail.com) [www.santifm.org](http://www.santifm.org)

## Your Details

Ordained Name		Date of Birth	DD/MM/YYYY
Passport Name		Gender	Male / Female
Passport Number		Countries of Citizenship	
Ordination Tradition, e.g. Theravada, Zen, Pure Land, etc.			
Date of Ordination	DD/MM/YYYY	Ordination type, e.g. Novice, Nun or Monk	

## Contact Details (if applicable)

Monastery Name							
Street		City & Country		State		Post Code	
Tel		Mobile					
Email							

## Emergency contact details

Name		Relationship to you	Eg Friend, Mother etc
Tel		Mobile	
Email			

**Physical and Mental Health** (This information remains confidential.)

Please fully inform us of any physical and/or mental health conditions (including allergies) that you may have, how they affect you, and how they are managed.

**Your Preferred Period of Stay**

Arrival Date	DD	MM	YYYY	Departure Date	DD	MM	YYYY
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**Transport Details (if already known)**

Arrival Date	DD	MM	YYYY	Airline / Train / Bus Company	
Flight / Train / Bus - Number				Arrival Time	00:00 AM/PM
Terminal No. / Train or Bus Station				Do you need help with transport?	Yes/No

**Use of Money**

Please note that monastics in our tradition do not use money in any way. When you first come to Santi on a temporary basis, if you have funds of your own, please make arrangements before you come for their safe keeping while you are at Santi. When you are staying at Santi, you will not need any funds, as Santi FM will look after your requirements of accommodation, food, transport, medicine, and so on. Monastics who wish to join the resident Sangha at Santi on a long term basis must completely relinquish all funds first. If you have any questions about this, please ask.

**I, the undersigned, declare that I have completed all sections of this form completely and truthfully.**

Name

Signature

Date Signed

DD/MM/YY