



Dzogchen Monastery, South India

Dzogchen Monastery Visitor Application Form

Please print all details clearly in capital letters.

Please send a scanned copy of the completed form to dzogchenmonastery@dzogchen.org.in

Personal Details

Family Name: _____ First Name: _____

Date of Birth (dd/mm/yy): _____/_____/_____ Male /Female: _____

Nationality: _____

Address: _____

Suburb/Town: _____

State: _____ Postcode/Zip: _____

Country: _____

Home Telephone: _____ Mobile/Cell Phone: _____

Email: _____

Spiritual Details

Do you follow any spiritual tradition or lineage? If so, since when?

Tradition: _____ Year: _____

How did you hear about Dzogchen Monastery?

Purpose of Visit

Arrival Date and Proposed Duration of Stay

Proposed arrival date: _____

Proposed duration of stay at Dzogchen Monastery: _____

Once your application has been processed, we will inform you whether your application has been accepted.

Dzogchen Monastery Office