

Meherabode

The Avatar Meher Baba Center of Southern California

L.A. URBAN SAHAVAS REGISTRATION FORM

Welcome!

You will be registered once you send us this completed form, along with payment in full. You can pay by check or credit card. We will then send you a receipt via email.

Please make checks payable to **AMBCSC** and mail (together with completed form) to:

SAHAVAS
Avatar Meher Baba Center of So. Calif.
1214 S. Van Ness Avenue
Los Angeles, CA 90019

Note: deadline for registration is June 30th

"True Love is no game of the faint-hearted and the weak; it is born of strength and understanding"

— Avatar Meher Baba

The Los Angeles Silence Day

Urban Sahavas

Avatar Meher Baba Center
of Southern California
1214 S. Van Ness Avenue
Los Angeles, CA 90019

Saturday July 1 to Monday July 3, 2017

First Come, First Served: Meherabode, our beautiful and comfortable Center, has a maximum capacity of only 90 registrants. On Saturday, July 2nd, on-site registration begins at 8:00 AM, and the Sahavas Program begins at 10:00 AM. Start time on Sunday and Monday is also at 10:00 AM.

Please fill in the following:

Family Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email (REQUIRED): _____

Names of all those attending (and please list the age if younger than 18):

...and please check this box if this will be your first Sahavas

Name: _____ Gender: _____ Age: _____

How much will it cost?

Number of Persons	Cost Per Person	Sub-Total
Adults (13 and Over): _____	x 140.00	= _____
Youths (8 - 12): _____	x 50.00	= _____
Children (3 - 7): _____	x 30.00	= _____

Total = \$ _____

Three lunches and two dinners will be served. Please check your preference:

Vegetarian Non-Vegetarian Gluten-Free

If you are able, we'd appreciate your help setting up, serving and cleaning up for one meal.
Please check which meal you can help with:

Saturday Lunch Saturday Dinner Sunday Lunch Sunday Dinner Monday Lunch

I would like to sponsor someone who can't afford the requested donation.

Enclosed is \$ _____ for this purpose

I, or a family member, would like a scholarship to the L.A. Urban Sahavas. If funds are available:

Name: _____ Adult (13 and Over) Youth (8 - 12) Child (3 - 7) # of Days: _____

Total Enclosed: \$ _____

Visa / MasterCard #: _____ **Exp. Date:** _____

Name on Card: _____

Please list your Check # if including it in your registration by mail: _____

For those paying with a credit card, you may fax your registration form to: **310-425-3307** or fill out the form, scan it and email to **AMBCSCUrbanSahavas@gmail.com**.

Please email all QUESTIONS to: AMBCSCUrbanSahavas@gmail.com

We Welcome our Special Guests!
Guest Speaker: Raj Khilnani, Guest Musician: Jim Meyer

The Annual Silence Day Sahavas
is sponsored by the

**Avatar Meher Baba Center
of Southern California
1214 South Van Ness Avenue
Los Angeles, California 90019-3520**

