

**Order of
reception**

No:

To :

SOTO ZEN BUDDHISM EUROPE OFFICE

277, Rue du Faubourg Saint Antoine, 75011, Paris, France

Email: info@sotozen.eu FAX:+33 (0) 1 46 33 60 04

(Date) / /

I would like to participate in
the EU Sokaibu Sesshin Seminar at Kanshoji from 6th to 9th March 2014

• Name: _____ (Signature)

• Priest's Name: _____

(*Japanese Name registered as Soto school's priest)

• Date of Birth: (Date) (Month) (Year) _____

• Date Ordained: (Date) (Month) (Year) _____

• Residential Address: _____

• Email Address: _____

• Telephone number: _____

(*Mobile phone is preferred)

• Master's Name: _____ (Signature)

• Transportation to Kanshoji: Car / Train / _____

(Do you require a lift from the nearest station "la coquille"? : YES / NO)

*Please attach a photo copy of your Priest Registration Certificate with this application form.