

MURLI NOTICE
INTERNATIONAL BK CHILDREN'S RETREAT 2003 MADHUBAN
"FLYING SIXTEEN CELESTIALS ANGELS"
24th – 31st DECEMBER 2003
(Age group 7-14 years old)

INFORMATION

1) WHO CAN COME?

- a) All participants should be BKs between the ages of 7-14 years following the principles.
- b) All participants should be in good physical and emotional health.
- c) All participants should attend the **FULL** sessions of the retreat
- d) They should have some understanding of English language.
- e) All participants **must be accompanied** by their BK parent/guardian.

2) WHEN DOES THE RETREAT BEGIN?

- a) Registration of the retreat begins on 24th December morning.
- b) The Retreat proper begins on the 24th December evening and ends on the morning of the 31st December.
- c) All participants and their parent/guardian should arrive in Madhuban before 24th December.
- d) All participants will be divided into 2 age groups (7-10 years old & 11-14 years old)

3) LETTER OF AUTHORISATION FROM PARENTS

- a) It is essential that a parent or guardian signs the enclosed letter of authorisation form for the participant. Please indicate on the form if you are authorising someone else to act as guardian. Please fax (not email) to the Kuala Lumpur office on: +603-22834070

4) FACILITATORS RETREAT (22nd – 23rd Dec 2003)

- a) Registration for the facilitators retreat begins on the morning of 22nd December.
- b) The retreat begins on 22nd December and ends on 23rd December.
- c) All facilitators should arrive in Madhuban before 22nd December.

5) HOW TO REGISTER?

Please fill up the attached form and send it to your National Co-ordinating Office (NCO) by 25th November 2003. The NCO will forward it by 1st December 2003 to:

The International Co-ordinator BK Children's Retreat
Harmony House
10, Lorong Maarof, Bangsar Park
59000 Kuala Lumpur, MALAYSIA
Tel: 603-2282 6396
Fax: 603-2283 4070
E-mail: bkwsun@tm.net.my

FACILITATORS PERSONAL DETAILS FORM

The International BK Children's Facilitators' Training (22nd – 23rd December 2003)

Please complete all the details on this form and return as soon as possible to your National Coordinating Office. The NCOs should return this form to the *International Coordinator of the BK Children's Retreat in Kuala Lumpur* by the **1st December 2003**.

Facilitators' Requirements:

- Only those who have experience and are currently teaching BK children.
- Able to communicate in English language.
- Able to attend the FULL Facilitators' Training Sessions (22nd – 23rd December) and the International Children's Retreat (24th – 31st December).

Please use BLOCK letters.

COUNTRY: _____

First Name: _____

Family Name: _____

Bro/Sis: _____ Age: _____

Centre Attended: _____

Address for Correspondence: _____

Tel: _____ Fax: _____

E-mail: _____

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BK CHILDREN'S PERSONAL DETAILS FORM

The International BK Children's Retreat (24th – 31st December 2003)

Please complete all the details on this form and return as soon as possible to your National Co-ordinating Office. The NCOs should return this form to the *International Coordinator of the BK Children's Retreat in Kuala Lumpur* by the **1st December 2003**.

Please use BLOCK letters.

COUNTRY: _____

First Name: _____

Family Name: _____

Bro/Sis: _____ Age: _____

Parent/Guardian's name: _____

Centre Attended: _____

Address for Correspondence: _____

Tel: _____ Fax: _____

E-mail: _____

Name of Parent/Guardian _____

Signature of Parent/Guardian _____

Note for Parent/Guardian:

1. Please accompany your children for the registration on **24th December**.
2. You are NOT allowed to attend the Retreat except for the morning session on the **31st December**.

“FLYING SIXTEEN CELESTIALS ANGELS”

International BK Children’s Retreat – Gyan Sarovar

Wednesday 24th December – Wednesday 31st December 2003

Please sign and fax this form to Kuala Lumpur: +603-22834070

LETTER OF AUTHORISATION FROM PARENTS (For all youth aged under 18/21)

I/We _____

Name _____

Address _____

being the parent(s)/guardian(s) of the child/children named _____

Agree to them attending the International BK Children’s Retreat at the Brahma Kumaris World Spiritual University, Gyan Sarovar Academy for a Better World, Salgaon, Mount Abu 307501, India.

During the period of the International BK Children’s Retreat, and travel to and from it, we understand and accept that the Organisers and the Management of the Brahma Kumaris World Spiritual University will take all reasonable care but do not accept any responsibility for any accident, injury or any loss of any personal property and possessions or any damage in person, in kind or any type.

I/We can confirm that I/we will/will not* be accompanying my/our child/children to the Brahma Kumaris World Spiritual University, Mount Abu and I/we will be staying with the Brahma Kumaris World Spiritual University, Mount Abu for the duration of my/our child/children’s stay with the Brahma Kumaris, Mount Abu.

I/We authorise a responsible person of/or designated by the Brahma Kumaris World Spiritual University to act in Loco Parentis if my/our child/children need to be taken to hospital or a doctor when I/we are not present.

I/we the parent(s)/guardian(s) undersigned fully accept responsibility for any accident or damage or injury caused by my child/children to any person or the property or possessions of any person whatsoever during the time of their visit or travel to and from the International BK Children’s Retreat at the Gyan Sarovar Academy for a Better World.

Please note that neither Gyan Sarovar Academy for a Better World, Brahma Kumaris World Spiritual University nor any other Brahma Kumaris entity is insured in any manner for or in relation to the care or well-being of any child/children or the property thereof on or in transit to or from its premises. I/we understand and accept that it is our own responsibility to take out my/our own insurance for the duration of my/our child/children’s stay at and travel to and from Gyan Sarovar.

* As I/we will not be accompanying my/our child/children to the Brahma Kumaris World Spiritual University, Mount Abu I/we authorise _____ to act as guardian of my/our child/children on my/our behalf for the duration of my/our child/children’s stay with the Brahma Kumaris, Mount Abu.

Please sign:}Parent or Guardian

Dated: