## Yoga & meditation

Retreat of Silence at Babaji's Kriya Yoga Ashram of Saint-Étienne de Bolton, Quebec from December 26 to 31, 2018

Dear student of Kriya Yoga,



Om Kriya Babaji Nama Aum

You are invited to attend a Silence Retreat at the Babaji Kriya Yoga Ashram in Saint-Étienne de Bolton, starting December 26 at 7 pm to December 31, 2018 at 9 am. People who can not stay 5 days can participate in a minimum of two days and two nights at any time during these dates. Participants wishing to stay longer are welcome.



## DAILY PROGRAM

6:30 to 8:30 am: Group practice of pranayama and meditation.

10 am to 11 am: Lunch

3:30 pm to 5 pm: Hatha Yoga Posture Course, with Yoga Nidra. Deepen your practice with Acharya Amman

5 pm to 6 pm: Group practice of pranayamas and meditation.

6 pm: Dinner

7 pm: Inspiring Lecture given by Acharya Amman on a theme related to the practice of silence, self-realization, renewal of intentions (Sankalpa) during Yoga Nidra and the development of continual awareness as well as training on methods to deepen your experience.

Outside these periods, participants will have **free time to** develop their sadhana, study, meditation journal. They will have access to all the amenities of the Ashram including Kutir Tapas near the lake. **Please bring your cross-country skis and snowshoes!** 

**Cost of the retreat in silence**, including accommodation and meals: a suggested contribution of only \$ 115 + taxes per day, <u>with a minimum of two days and two nights participation required.</u>



RSVP. Please confirm the approximate date and time of your arrival in addition to sending us a <u>deposit of \$75 payable</u> by check to "Éditions du Kriya Yoga" which you will send to the following address: CP 90, Eastman, Quebec JOE 1PO. Or give us permission to use your credit card either by calling 1 888 252 9642 or on our website under Enroll in Activity:

http://www.babajiskriyayoga.net/english/kriya-yoga-enrollment.htm If you need assistance with local transportation, please let us know.

May your way be illuminated

Mr. G Satchidananda

Registration form for the Si Name:			
Address:			
City:	_ Province:	Postal code: _	
Email:			
Phone:	Deposit: _		
Date & time of arrival			
Date & time of departure _			_
Need transportation:			