

Please fill out this form and send, fax or email to:

**Upaya Zen Center
1404 Cerro Gordo Road
Santa Fe, NM 98501**

Name (as it appears on passport): _____

Sex: _____

Address _____

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address: _____

Telephone(s): _____

Fax: _____

Date of Birth: _____

Nationality: _____

Passport number: _____

Place of Issue: _____

Date of Issue: _____

Date of Expiration: _____