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Temple Stay Application Form

寺院生活静修申请表格

Personal Details 个人资料		
Name (in English) 英文姓名:		Name (in Chinese) 中文姓名:
Date of Birth 出生日期:		Age 年龄:
Gender 性别: <input type="checkbox"/> Male 男 <input type="checkbox"/> Female 女		Marital Status 婚姻状况:
Citizenship 公民身份: <input type="checkbox"/> Singaporean 新加坡公民 <input type="checkbox"/> Permanent Resident 永久居民 <input type="checkbox"/> *Foreigner 外籍 *Legal Status (if you are a foreigner) 持有签证 (如果您是外籍) <input type="checkbox"/> Employment Pass 就业准证 <input type="checkbox"/> S Pass S 准证 <input type="checkbox"/> Work Permit 工作准证 <input type="checkbox"/> Student Permit 学生准证 <input type="checkbox"/> Others (pls specify) 其他 (请注明): _____		
Contact Details 联系方式		
Address 地址:		
Contact / Mobile No. 联系电话:		Email 电邮:
Emergency Contact Name & Number 紧急联系人名字及电话:		Relationship to Applicant 与申请者的关系:
Health 健康状况		
Do you have any long-term health issue(s) or disability? 您是否有长期健康状况或身体残缺? If yes, please specify 如果是, 请具体说明:	<input type="checkbox"/> Yes 是	<input type="checkbox"/> No 否
Have you ever been under psychiatric care? 您是否曾接受过精神科治疗?	<input type="checkbox"/> Yes 是	<input type="checkbox"/> No 否
Do you have a history of alcohol or drug dependency? 您是否曾长期依赖酒精或药物?	<input type="checkbox"/> Yes 是	<input type="checkbox"/> No 否
Are you currently taking any medication? 您是否正在服用药物?	<input type="checkbox"/> Yes 是	<input type="checkbox"/> No 否
Do you have any food or drug allergy? 您是否对任何食物或药物过敏? If yes, please specify 如果是, 请具体说明:	<input type="checkbox"/> Yes 是	<input type="checkbox"/> No 否

Experience 经历			
Language(s) that you speak 您会说的语言:			
Highest level of education 最高学历:			
Work experience(s) (please attach CV) 工作经验 (请附上简历):			
Life experience(s) 生活经历:			
Religion 宗教信仰			
When did you first come in contact with Buddhism? 您首次接触佛教是在什么时候?			
Have you ever participated in any activity organised by our monastery? 您是否曾参加过本寺主办的活动? If yes, please specify 如果有, 请说明:			
Have you taken the Three Refuge ? 您是否已皈依三宝? If yes, please specify below 如果是, 请在以下说明:			<input type="checkbox"/> Yes 是 <input type="checkbox"/> No 否
Refuge Master Dharma Name 皈依师法号:		Refuge Name 皈依法名:	
Monastery Name 寺院名称:		Date 日期:	
Do you have a Haiqing? 您是否有海青?	<input type="checkbox"/> Yes 是	<input type="checkbox"/> No 否	Your Height: CM 您的身高
Have you taken the Five Precepts ? 您是否已受五戒? If yes, please specify below 如果是, 请在以下说明:			<input type="checkbox"/> Yes 是 <input type="checkbox"/> No 否
Precepts Master Dharma Name 授戒师法号:		Refuge Name 法名:	
Monastery Name 寺院名称:		Date 日期:	
Do you have a Manyi? 您是否有缦衣?			<input type="checkbox"/> Yes 是 <input type="checkbox"/> No 否
Which centre do you usually go to for practice? Who is your main teacher? 您通常到哪间道场修持? 跟随哪位导师?			
What does your daily spiritual practice include? 您每日修持的功课包括哪些?			

Temple Stay 寺院生活静修				
2 Formats Available 提供两种方式:				
<p>1. Guided retreat with some time for individual practice (For one whom wish to experience a tranquil stay in the Monastery, and to participate in group practices guided by Venerables. The Monastery will assist to prepare your daily practice schedule.) 引导修行 (适合希望体验寺院平静生活及参与法师指导共修者。寺院将准备每日静修时间表, 内含个别修习时段。)</p> <p>2. Self-Practice (For experienced and seasoned practitioners.) 个人自修 (适合有定期或长期静修经验者。)</p> <p>To be considered for self-practice approval, you are required to:</p> <ul style="list-style-type: none"> Have attended at least 1 guided temple stay and Prepare and submit your daily practice schedule (Appendix A). <p>若自修核准, 您必须:</p> <ul style="list-style-type: none"> 参与至少一次指导静修及 准备并提交个人每日自修时间表 (Appendix A)。 				
Important Note 重要备注: <ul style="list-style-type: none"> Minimum <u>3-months interval</u> is required between each temple stay. 每次的寺院生活静修须相隔至少三个月。 Temple stay is chargeable at \$S\$20 per day. For extensive self-practice retreat (more than 7-days stay), the Monastery will contact you on fees separately. Method of payment will be advised after application approval. 寺院生活静修费用为每日 \$S\$20。如长期自修 (时长超过七天), 其费用寺院将个别联络您。付款方式将在申请批准后通知。 				
Is this your first time attending KMSPKS Temple Stay? 您是第一次参与本寺的寺院生活静修吗?			<input type="checkbox"/> Yes 是	<input type="checkbox"/> No 否
If no, please specify 如果否, 请注明: i. How many times have you previously participated? 您参与过几次? _____ ii. Your last date of stay 上次参与静修的日期: _____				
Preferred Period 参与日期 <i>If you prefer extended self-practice retreat, please refer to next page.</i> <i>如果您希望长期自修, 请查询下一页。</i>				
Year 年份	Month 月份	Period 日期	Format 方式	Select 选择 ✓
2026	January 一月	20 th – 23 rd	Guided 引导修行	FULL 额满
<p style="color: red;">Kindly check back in February 2026 for new temple stay dates. 请于 2026 年 2 月查询寺院生活新日期。</p>				

Extended Self-Practice Retreat Only 仅限长期自修 <i>Exact dates shall be determined by the Monastery.</i> <i>具体日期将由寺院决定。</i>	
<input type="radio"/> 1 week 一周	<input type="radio"/> Others, please specify 其他, 请注明:

8 Precepts 八关斋戒		
Would you like to undertake Eight Precepts (one day one night — which includes no food intake after noon till the next morning) during your stay? (optional and subject to availability) 您是否希望在静修期间受持八关斋戒 (一日一夜, 需过午不食直至隔日清晨)? (非强制, 授戒仪式是否进行将视情况而定。)	<input type="checkbox"/> Yes 是	<input type="checkbox"/> No 否
Short Biography 自传		
Write a short biography of yourself and why you want to experience Temple Stay? 请提供自传, 并描述选择参与寺院生活静修的初衷。 (150 words 字)		
Do you have any special skill set which you can service the temple during your stay? 您是否有任何特长可在寺院静修期间为寺院服务?		

Declaration 声明

By signing this application form, you agree that 通过签署此申请表格, 您同意:

- (A) you shall fully indemnify and hold Kong Meng San Phor Kark See Monastery (the “Monastery”), its employees or volunteers free and harmless from and against all claims, liabilities, costs, charges and expenses (including legal costs) for any damage, loss, bodily injury, accident and/or loss of life or property arise directly or indirectly as a result of or in connection with your voluntary participation in this Programme at the Monastery;
承担所有在光明山普觉禅寺（以下简称“寺院”）参与此活动期间与寺院、员工或义工直接或间接引起的所有索赔、责任、成本、费用（包括法律费用）、损害、损失、人身伤害、事故和生命或财产损失；
- (B) the Monastery may collect, use, process and disclose personal data, as provided in this application form, or obtained by the Monastery as a result of your application, for the purposes stated in the Monastery’s privacy policy including (a) the processing and administering of this application; and (b) contacting you for matters related to this application and other information about the Monastery’s programmes, products and services which may be of interest to you;
寺院可根据此申请表所提供的个人资料，或因您的申请而获得的个人资料，用于寺院隐私政策中规定的目的，包括（a）处理和管理此活动的报名；及（b）与您联系有关此活动事宜以及其他您可能感兴趣的寺院活动、产品和服务信息；
- (C) photographs and/or videos may be taken during this Programme for record or publicity purposes; and
在活动期间所拍摄的照片和视频可用于记录或宣传目的；以及
- (D) you have read, understood and accepted the Monastery’s privacy policy available at www.kmspks.org/privacy and that you may withdraw your consent and unsubscribe from the Monastery’s communications at any time. Please visit our website at kmspks.org/privacy/ for further details on our data protection policy, including how you may access and correct your personal data or withdraw consent to the collection, use or disclosure of your personal data.
您已阅读、理解并接受寺院的隐私政策（www.kmspks.org/privacy）。您可以随时撤销同意并取消订阅寺院的资讯。请至本寺网站 www.kmspks.org/privacy/，了解有关个人资料保护政策的详细信息，包括您如何访问和更正您的个人资料，或撤销同意蒐集、使用或披露您的个人资料。

Name of Applicant
申请者姓名

Signature of Applicant
申请者签名

Date
日期

Appendix A – Prepare Your Self-Practice Schedule (for self-practice retreat only)

准备个人自修时间表（若选择个人自修方式）

Day 1 第一天

Retreat Date 静修日期:			
Do you need dinner 您需要药石吗?		<input type="checkbox"/> Yes 需要 <input type="checkbox"/> No 不需要	
Time 时间		Practice 静修 / Activity 活动	Remarks 备注
From 从	To 至		
8AM	830AM	Reporting 报到 Briefing / Collect Items / Check-in 说明 / 领取物品 / 安单	To-be confirmed 有待确定
1115AM	12PM	^Lunch 午斋	VHCMH L2 Dining Hall 斋堂
5PM	530PM	Dinner 药石	VHCMH L2 Dining Hall 斋堂
1030PM	-	Lights Out 养息	Lodging Room 寮房

^Bring lunch chanting card if necessary 如需，请携带午斋念诵卡

Appendix A – Prepare Your Self-Practice Schedule (for self-practice retreat only)

准备个人自修时间表（若选择个人自修方式）

Day 2 第二天

Retreat Date 静修日期:			
Do you need dinner 您需要药石吗?		<input type="checkbox"/> Yes 需要 <input type="checkbox"/> No 不需要	
Time 时间		Practice 静修 / Activity 活动	Remarks 备注
From 从	To 至		
6AM	615AM	Wake up / Wash up 晨起 / 洗漱	Lodging Room 寮房
7AM	730AM	Breakfast 早斋	VHCMH L2 Dining Hall 斋堂
1115AM	12PM	^Lunch 午斋	VHCMH L2 Dining Hall 斋堂
5PM	530PM	Dinner 药石	VHCMH L2 Dining Hall 斋堂
1030PM	-	Lights Out 养息	Lodging Room 寮房

^Bring lunch chanting card if necessary 如需，请携带午斋念诵卡

Appendix A – Prepare Your Self-Practice Schedule (for self-practice retreat only)

准备个人自修时间表（若选择个人自修方式）

Day 3 第三天

Retreat Date 静修日期:			
Do you need dinner 您需要药石吗?		<input type="checkbox"/> Yes 需要 <input type="checkbox"/> No 不需要	
Time 时间		Practice 静修 / Activity 活动	Remarks 备注
From 从	To 至		
6AM	615AM	Wake up / Wash up 晨起 / 洗漱	Lodging Room 寮房
7AM	730AM	Breakfast 早斋	VHCMH L2 Dining Hall 斋堂
1115AM	12PM	^Lunch 午斋	VHCMH L2 Dining Hall 斋堂
5PM	530PM	Dinner 药石	VHCMH L2 Dining Hall 斋堂
1030PM	-	Lights Out 养息	Lodging Room 寮房

^Bring lunch chanting card if necessary 如需，请携带午斋念诵卡

Appendix A – Prepare Your Self-Practice Schedule (for self-practice retreat only)

准备个人自修时间表（若选择个人自修方式）

Day 4 第四天

Retreat Date 静修日期:			
Do you need dinner 您需要药石吗?		<input type="checkbox"/> Yes 需要 <input type="checkbox"/> No 不需要	
Time 时间		Practice 静修 / Activity 活动	Remarks 备注
From 从	To 至		
6AM	615AM	Wake up / Wash up 晨起 / 洗漱	Lodging Room 寮房
7AM	730AM	Breakfast 早斋	VHCMH L2 Dining Hall 斋堂
1115AM	12PM	^Lunch 午斋	VHCMH L2 Dining Hall 斋堂
3PM	-	!Administration / Check-out 行政 / 离单	To-be confirmed 有待确定

^Bring lunch chanting card if necessary 如需，请携带午斋念诵卡

!Return issued items, completed survey form, optional donation envelope

请归还寺院物品、填好的回馈表与随喜供养信封