

Honpa Hongwanji Mission of Hawaii

Minister's Lay Assistant Retreat

Buddhist Study Center, Honolulu, HI

October 15-17, 2021

Who can apply?

Anyone who has been selected and designated by their resident minister or rinban as a Minister's Lay Assistant at their temple and is actively working with their minister mentor at their temple. Also, anyone who is a Certified Minister's Lay Assistant and is actively working with their minister mentor at their temple. In both cases their application form must be signed by the resident minister or rinban of their temple.

Purpose of the Retreat

To review and enrich the knowledge of the participants in the rituals and traditions of the Jodo Shinshu Hongwanji-ha, General Buddhism and Shin Buddhism. All of the knowledge and skills that are associated with functioning as a Minister's Lay Assistant will be covered during the retreat. The retreat is an opportunity to learn and/or refresh one's skills and knowledge that is associated with the role of a Minister's Lay Assistant, but completion does not result in certification. The conditions of certification are presented in the document Shin Buddhist Ministry in Hawaii. This retreat can be taken many times so long as it remains meaningful and helpful to the participant.

PRELIMINARY Retreat Schedule

Friday, October 15, 2021

Time	Activity	Description
6:00pm	Registration	
6:30pm	Introductions	Retreat Explanation, Mixers
7:00pm	Opening Service	
7:30pm	Workshop	Role of the Minister Lay Assistant - Rev. Kuniyuki
8:30pm	Service Preparation	Preparation for Service Toban- Rev. Kuniyuki
9:00pm	End of Friday Session	

Saturday, October 16, 2021

Time	Activity	Description
9:00am	Morning Service	At Buddhist Study Center
9:30am	Service Review & Workshop	Rituals and Traditions I - Rev. Umitani
10:30am	Lecture	Review of Basic Buddhism - Rev. Kuniyuki
11:30am	Workshop	Shoshinge and Jodo Shinshu I - Rev. Kuniyuki
12:30pm	Lunch	
1:30pm	Workshop	Chanting Tradition & Gemon - Rev. Umitani
3:00pm	Workshop	Shoshinge and Jodo Shinshu II- Rev. Kuniyuki
5:00pm	Dinner	
6:00pm	Practice Session	Opportunity to Practice and Review Skills
7:00pm	Evening Service	Facilitator: Rev. Umitani
8:30pm	Service Review	Reflection by Participants while being guided by the designated minister mentor
9:00pm	End of Saturday Session	

Sunday, October 17, 2021

Time	Activity	Description
9:00am	Sunday Service	At MOILILI Hongwanji Temple
10:00am	Service Review & Workshop	Rev. Umitani
11:00am	Workshop	"Be The Refuge" discussion with Chenxing Han
12:30am	Lunch	
1:30pm	Workshop	Opportunities as a MLA - Dexter Mar
2:30pm	Closing Service	Facilitator: Rev. Umitani
3:00pm	Service Review	Rev. Umitani
3:30pm	Retreat Summary & Reflection	
4:30pm	End of Retreat	

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Participant Information				
Last Name		First Name		
Nickname		Mailing Address		
Cell phone		E-mail		
Temple Affiliation		Years of Service as a MLA		
Referring Minister:	Signature:		Print Name:	

Emergency Contact Information			
In case of emergency, who should we contact?			
Name		Relationship	
Phone number		Secondary No.	

If this person cannot be contacted, who should we call?			
Name		Relationship	
Phone Number		Secondary No.	

Medical Information			
Physician's name		Phone number	
Type of medical insurance		Policy number	
Describe any medical information to be aware of (i.e. allergies, medications):			
Special dietary needs (i.e. vegetarian):			

Agreement and Signature			
<p>I hereby give my approval to participate in any and all activities at the Honpa Hongwanji Mission of Hawaii Minister's Lay Assistant Retreat. I assume all risks and hazards incidental to such participation; and I do hereby waive, release, absolve, indemnify and agree to hold harmless the Honpa Hongwanji Mission of Hawaii, the affiliated temples, the ministers, members, advisors, organizers, sponsors, chaperones, participants, and persons, for any claim arising out of any injury to me whether the result of negligence or for any other cause. I understand that a current medical insurance program must cover me. In case of emergency, and neither of the above nor the family physician can be reached, I hereby authorize that I may be taken to the nearest medical facility for emergency treatment, including arrangements for emergency medical transportation services of which I will be responsible for any payment charged for such services. I acknowledge that the above information is correct.</p>			
Participant's Signature		Date	

Please make checks payable to "Honpa Hongwanji Mission of Hawaii" and mail to:

Minister's Lay Assistant Enrichment Retreat

Buddhist Study Center

1436 University Ave.

Honolulu, HI 96822

\$50 Registration Fee