



Vipassana Meditation

As taught by S.N. Goenka
in the tradition of Sayagyi U Ba Khin

For official purposes only

Conf.
No.

Group
No.

Acc.
No.

OLD STUDENT

NEW STUDENT

CHILDREN'S APPLICATION FORM

INCOMPLETE FORMS WILL NOT BE ACCEPTED. PLEASE FILL UP ALL FIELDS.

Course Dates: From _____ To _____

Center: _____

First Name		Middle Name	Last Name (Surname)	Gender: Male Female	
Address (with City, Dist., Country etc.): Pin code: _____					
Contact Details	Mobile:			Age -	
	Email:				

1. **Photo ID Type:** Passport Aadhar Card PAN Card National ID **ID No.:** _____

2. **Parent's Details:** _____ (Mention your ID number above)

Father's Name: _____ **Mother's Name:** _____

Have they completed a course: _____ **Parent's Mobile Number:** _____

3. **Completed Children or 70 min course:** No Yes **Practicing Anapana in Home/School:** No Yes
Details: _____ **Details:** _____

4. **Name Of School/College:** _____ **Std/Year:** _____

5. Will a friend or family member be taking this course as well? No Yes
If yes, write Name and relationship

6. **EMERGENCY CONTACT NAME & NUMBER (Also mention the relationship to the person):**

7. **Language Comprehension:** How well do you understand the language(s) in which this course will be conducted?
Preferred language of Instructions/Discourses: _____

Basic	Intermediate	Expert

8. **Do you have any past/present - physical health conditions (If yes, please give details):**

9. **Write something about you:**

I hereby declare that I have read and studied the code of discipline for the meditation course.
In addition, I hereby consent to the storage and handling on a computer or otherwise of my above stated personally identifiable information in accordance with the Privacy Policy of the facility at which the course is being held.

Applicant Signature: _____

Date: _____