APPLICATION FORM

(Please complete this form and return to the contact address given for the course you wish to attend, to receive the confirmation of your place in the course. Kindly arrive only on the day course commences.)

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I hereby declare that I have read and studied the code of discipline for the meditation course and accept the seriousness of the rules and regulations. I wish to join the course starting from:

If accepted, I promise faithfully to stay for the complete ten days and abide by all the rules.

Date	Signature
Male / Female :	Age:
Contact Address :	
	Pincode :
Occupation : Business	/ Service / Student
Do you have any phys	
	mental health problem?
Are you taking any me	dication?
(If yes to any of the 3 sheet of paper)	above, please give full details in a separate
	ve Language:
Are you an old Studen	
(An old student is one	who has done at least one full ten day course one of his authorised assistants)
	was your first course:
	With whom (A.T.) :
How may courses have	e you taken :
10-day:	20-day 30/45-day
When was your last co	ourse :
Where :	With whom (A.T.) :

If you are a new student, who introduced you to Vipassand meditation?	
(To be completed by an old student who has recommended a new applicant to the course)	
Old Student's Name.	
Address:	
Pincode:	
I have clearly explained the rules and discipline to the applicant, and have stressed that he/she must stay for the full ten days and that he/she must strictly abide by all rules, regulations, timetable, noble silence etc.	
I believe, the applicant has fully grasped the importance of them, before he/she signed the application form.	
Kindly confirm his/her admission to the course.	
I have attended no. of courses and the last course was on	
Date : Signature	
PRINTED MATTER	
Din Code :	