



# Vipassana Meditation Application

**"To apply for a course you must read Rule & Registration carefully."**

Location :  Bodhidhammayan Retreat Kaeng-Khoi, Saraburi Only for Officer  
 Saeng Dhamma Bhodhiyan Retreat Hatyai, Songkhla  New  Alumni  
 Bodhidhammayan Retreat, Phuket

To..... I want to enroll in an **Vipassana Meditation Course**

Date Between ..... to.....

Gender  Male  Female

First Name.....Last Name.....

Nickname..... Date of Birth.....Age.....Years, Degree.....

Occupation..... Work Place.....Work Contact.....

Marital Status  Single  Married  Divorced  Widow Number of Children.....

Address.....

Province/State.....Postcode.....Email : .....

Nationality..... Phone Number.....

Father's Name.....Mother's Name.....

**Emergency Contact Person (Must provide both)**

1.....Relationship.....Phone.....

2.....Relationship.....Phone.....

1. Do you have any mental, health or family issues?.....

2. What is your course taking expectation?.....

3. How do you get information about this course? (If be a person, please provide their name and relationship).....

4.What is your goal of practicing?.....

5. Have you ever practiced meditation before? If so, please describe. ....

6. Transportation  By your own  Travel back and forth with the foundation's van (at some cost).

I have read and agreed to all terms and conditions.

Signature.....

Date.....



School of Life Foundation

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