



Anapanasati Meditation Application

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

- Location : ☐ Bodhidhammayan Retreat KAENG-KHOI, SARABURI
☐ Sangdhambhodiyan Retreat HATYAI, SONGKHLA
☐ Bodhidhammayan Retreat, PHUKET
☐ School Of Life Foundation, BANGKOK

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

Date From to.....

Gender ☐ Male ☐ Female

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

Age.....Years, Degree..... Occupation.....

Work Place.....

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

Address.....

Province/State..... 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?.....

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2. How do you get information about this course?

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

.....

☐ I have read and agreed to all terms and conditions.

Signature.....

Date.....



School of Life Foundation

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