



Illinois Vipassana Center-Dhamma Pakāsa

0076 Fish Hatchery Rd, Pecatonica, IL 61063 Ph.: 815-489-0420 - Fax: 360-283-7068 - E-mail: childrens-courses@pakasa.dhamma.org
www.pakasa.dhamma.org

Anapana Meditation Course for Teens Information and Application Packet (Ages 13-15)

Dear Student,

We are happy to provide you this information about the Teens' Anapana Meditation Course to be held at the Illinois Vipassana Center.

For you, we have enclosed the Sample Schedule, the Code of Conduct (to be read carefully) and an Application Form. For your parents, there is the Parent/Guardian Information Sheet, a Permission Form, a Medical Emergency Information Form, and a Release for Use of Photographic Images.

Please ask your parents to complete the **Permission Form, Medical Form and Release for Use of Photographic Images**, and then send them to us along with your **Application Form** which you have filled out yourself.

When your application has been approved, we will send you an Acceptance Letter. This letter will include a list of what you will need to bring, as well as directions to the Center. If you and your parents list email addresses, we will send this by email. Otherwise, we will send your acceptance letter in the mail.

If you or your parents have any questions, please call the registration office at the number listed above.

We look forward to seeing you.

With best wishes,

The Registration Committee



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Teenagers' Course - Code of Conduct

Learning to practice Anapana meditation is very valuable because it helps you to become a better person. Practicing Anapana meditation will help you to train your mind to become concentrated and calm. This will make your mind strong so that you will be able to avoid doing or saying things that are hurtful or harmful to yourself and to others. This strength of mind will help you to feel happier and more peaceful. Practicing Anapana and learning to concentrate will help you to become the master of your mind.

To help you succeed in practicing Anapana meditation it is important that you do your best to follow the instructions that you will be given during the meditation course and also, while you are at the course, agree to follow the Code of Conduct written below. In the same way that a house needs a good foundation to support it, so the practice of Anapana needs a good foundation. This good foundation is built by following the Code of Conduct. It will help you to avoid performing actions that are harmful or hurtful to yourself and others.

While at the meditation center you should agree to follow these rules because they will provide a good foundation for your Anapana practice and will give you mental strength.

The Precepts

1. to abstain from killing any being;
2. to abstain from stealing;
3. to abstain from all sexual activity;
4. to abstain from telling lies;
5. to abstain from taking intoxicants.

Noble Silence

There will be extended periods of Noble Silence throughout the course. Noble Silence means silence of body, speech and mind. Any form of communication with fellow students, whether by gestures, sign language, written notes, etc., must be during the designated periods. These will be clearly defined throughout the course. Talking will be permitted during meals, during Dhamma service activities and during meetings with the assistant teachers.

Segregation of the Sexes

Please observe complete segregation of the sexes throughout the course. Friends or family members should not contact each other in any way during the course.



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Teens' Meditation Course - Tentative Schedule

SATURDAY

- 5:30 p.m. Course registration begins
- 6:00 p.m. Dinner
- 7:00 p.m. Welcome & orientation talk for teens and group leaders
- 7:30 p.m. Children meet with group leaders
- 8:00 p.m. Course begins in Meditation Hall
- 8:45 p.m. Back to dormitories in Noble Silence
- 9:30 p.m. Lights out

SUNDAY

- 5:40 a.m. Wake up & physical activity (Noble Silence)
- 6:00 a.m. Meditation Hall Activities
- 6:45 a.m. Breakfast & writing/drawing activity (Noble Speech permitted in dining hall)
- 8:00 a.m. Meditation Hall Activities & Checking
- 9:00 a.m. Break observing Noble Silence to dorms, writing in journals & rest
- 9:45 a.m. Meditation Hall Activities
- 10:15 a.m. Snacks & break in Noble Silence from Hall to dining hall
- 10:45 a.m. Meditation Hall & Checking
- 11:45 a.m. Lunch & break in Noble Silence from Hall to dining hall
- 12:45 p.m. Closing discourse & Metta
- 1:30 p.m. Noble Silence ends—Clean-up dormitories
- 2:00 p.m. Course ends



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Teens' Courses - Parent/Guardian Information Sheet

The teens' course offers young people between 13 and 15 years old an introduction to Anapana meditation, which is a practice of the observation of natural breath to concentrate the mind. They will learn to practice Anapana and begin to take their first steps on the path of Dhamma. The entire path of Dhamma, rediscovered and taught by Gotama the Buddha more than 2500 years ago, is a universal remedy for universal problems and has nothing to do with any organized religion or sectarian tradition. For this reason, it can be practiced freely by all, in any place, at any time. Its practice does not conflict with any race, community or religion and will prove equally beneficial to one and all.

Young people who have started practicing Anapana have realized many benefits. Their ability to concentrate becomes enhanced, their memory gets sharper, their ability to comprehend a subject improves and they become calmer. In general, they feel they have a practical tool to use in the face of any type of adversity or challenge.

During the course, there will be meditation instructions as well as other activities such as games, art, and storytelling. The teens will be divided into groups according to their age for many activities. They will be assigned counselors who will personally accompany and assist them throughout the course, providing support and guidance as needed.

The intent of the teens' course is serious. It is not appropriate for teens who are too immature or otherwise unable to follow directions or to participate in organized, self-modulating activities. It is also not appropriate for teens who are unable to understand the meaning or purpose of the daily timetable and Code of Conduct. Segregation of the sexes will be maintained at all times in the accommodations as well as in the meditation hall and during much of the course.

It is not mandatory that a parent or guardian accompanies your teen to the course. Parents or guardians who are students of Goenkaji or his assistant teachers are welcome to stay at the center and participate in work projects. Since parents or guardians will not be participating in the course, they will follow a separate schedule. They will also be accommodated separately from the teens. We ask that parents and affiliated adults refrain from communicating with or contacting their teens throughout the course.

Parents or guardians who have not completed a ten-day course with Goenkaji or his assistant teachers are welcome to stay with their teens during registration, but should then leave the center until the course is over. There are numerous hotels, motels and campsites in the area.

Before applying for the course, please make sure that both you and your teen have read and understood the Code of Conduct and Sample Timetable



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(This page to be filled out by the student.)

Application for Teens' Course

Course Dates: From _____ to _____

Location: _____

Student's name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

E-mail address: _____

Boy: ____ Girl: ____ Age: ____ Birthdate: (month/day/year): ____ School Grade: ____

Parent/Guardian Name: _____ Telephone: _____

Do you speak English well? _____

Have you been to a Children's or Teens' Course before? Yes No How Many? _____

If yes, where and when was your last one? _____

Do you want to learn to meditate? Yes No

Why?

Do you ever meditate at home? _____

Who told you about this course? _____

Do you want to come to this course? Yes No

Why are you coming to this course?

Please write a little bit about yourself and what you like to do:

Have you read:

the Sample Timetable? Yes No

the Code of Conduct? Yes No

Do you agree to try to follow the Code of Conduct while you are at the meditation course? Yes No

Student's signature: _____ Date: _____



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(This page to be filled out by parent/guardian.)

Parent/Guardian Permission Form for Teens' Courses

Course Dates: From _____ to _____

Name of Parent or Guardian: _____

Relationship to child: _____

Street Address during the course: _____

Phone # you can be contacted at during the course: _____

Email address _____

Have you completed a ten-day Vipassana course with S. N. Goenka or one of his Assistant Teachers?

Yes No

Will you or another adult remain at the center for the duration of the course? Yes No

(Please note: teens do not have to be accompanied by an adult)

If yes, name of adult who will be accompanying your teen _____

(Note: they will need to send in a Dhamma service application, which is available from the registrar)

Is there anything we should know about your child that will help him/her to have a successful course (i.e., learning needs, physical or mental health issues, etc.)?

Does your child have any allergies? Yes No

If yes, please give details on medical information form (included in this package).

Is your child presently taking any medications? Yes No

If yes, please give details on medical information form (included in this package).

I give my permission for my child, _____, to attend this course. My child and I have read and understand the children's course materials (Parent/Guardian Information Sheet, Code of Conduct and Sample Timetable) and agree to abide by them.

Parent/Guardian signature _____ Date _____

I am driving to the course and willing to be contacted by others needing a ride: Yes No



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Medical Emergency Form and Contact List

CONSENT FOR MEDICAL TREATMENT

As the parent, agency representative or legal guardian, I hereby give consent to the **Illinois Vipassana Center** to provide all emergency, medical or dental care prescribed by a duly licensed physician (MD) osteopath (DO) or dentist (DDS)

for _____
(child's name)

This care may be given under whatever conditions are necessary to preserve the life, limb or well-being of my dependent.

Signed _____ Date _____

Home Phone _____ Cell Phone _____

Mother's Work _____ Work Phone _____
(employer's name)

Father's Work _____ Work Phone _____
(employer's name)

ALLERGIES AND SENSITIVITIES: Does the child have a history of skin or other untoward reactions or sicknesses following injection or oral administration of:

	Circle One	If yes, describe
a) Penicillin or other antibiotics	Yes No	_____
b) Morphine, Codeine, Demerol or other narcotics	Yes No	_____
c) Novacaine or other anesthetics	Yes No	_____
d) Aspirin, Empiricin or other pain remedies	Yes No	_____
e) Sulfadrugs	Yes No	_____
f) Tetanus antitoxin or other serums	Yes No	_____
g) Adhesive tape	Yes No	_____
h) Latex	Yes No	_____
i) Iodine or merthiolate	Yes No	_____
j) Any other drug or medication	Yes No	_____
k) Any foods, such as egg, milk or chocolate	Yes No	_____

DRUGS TAKEN RECENTLY: With the past six (6) months the child has taken: _____

CENTER STAFF: PLEASE KEEP THIS FORM WITH YOU WHEN YOU GO TO THE DOCTOR OR HOSPITAL AND NOTIFY THE PARENTS OR GUARDIANS IMMEDIATELY.



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IDENTIFICATION AND EMERGENCY INFORMATION

To Be Completed by Parent or Guardian

CHILD'S FIRST NAME	LAST	MIDDLE	SEX	TELEPHONE		
ADDRESS	NUMBER	STREET	CITY	STATE	ZIP	BIRTHDATE
FATHER'S FIRST NAME	LAST	MIDDLE	WORK TELEPHONE			
ADDRESS	NUMBER	STREET	CITY	STATE	ZIP	HOME TELEPHONE
MOTHER'S FIRST NAME	LAST	MIDDLE	WORK TELEPHONE			
ADDRESS	NUMBER	STREET	CITY	STATE	ZIP	HOME TELEPHONE

ADDITIONAL PERSONS WHO MAY BE CALLED IN AN EMERGENCY

NAME	ADDRESS	TELEPHONE	RELATION

PHYSICIAN OR DENTIST TO BE CALLED IN AN EMERGENCY

PHYSICIAN	ADDRESS	MEDICAL PLAN & NUMBER	TELEPHONE
DENTIST	ADDRESS	MEDICAL PLAN & NUMBER	TELEPHONE

IF PHYSICIAN CANNOT BE REACHED, WHAT ACTION SHOULD BE TAKEN?

----- CALL EMERGENCY HOSPITAL -----OTHER, EXPLAIN:-----

NAMES OF PERSONS AUTHORIZED TO TAKE CHILD FROM THE FACILITY

(CHILD WILL NOT BE ALLOWED TO LEAVE WITH ANY OTHER PERSON WITHOUT WRITTEN AUTHORIZATION FROM PARENT OR GUARDIAN)

NAME	RELATIONSHIP

SIGNATURE OF PARENT OR GUARDIAN	DATE
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Release for Use of Photographic Images

Please choose **one** of the options below

I hereby authorize the **Illinois Vipassana Center** and each of its sister non-profit organizations that teach Vipassana meditation as taught by S. N Goenka to use photographic images of _____ (name of child) taken on or about _____ (date of course) for purposes of disseminating information about Vipassana meditation and/or Anapana meditation for children. I understand that the images will not be used for commercial purposes, nor will they be sold or transferred to any other entity other than those mentioned above. I understand that these images may be used on flyers, brochures, displays, web pages and other informational media.

Signed: _____ Date: _____
Parent or legal guardian

I prefer not to have any pictures of my child used on any flyers, brochures, displays, web pages or other informational media.

Signed: _____ Date: _____
Parent or legal guardian