Bay Area Vipassana Center (BAVC) Waiver and Release of Liability

A Vipassana meditation course is a very intensive and demanding program that may involve strong emotional or physical experiences. Previous reaction patterns one may have experienced in the past could resurface in the mind during the course. Previously unknown, new mental and physical reaction patterns may also arise. For this reason, participants must be in good physical and mental health to be able to use the practice to work with these sometimes uncomfortable thoughts and sensations. Anyone who mentioned a history of physical or mental health challenges on their application has received follow-up questions about these challenges before being accepted to the course. BAVC has relied on the responses to these questions in accepting your application.

I hereby confirm that I have disclosed completely and honestly all previous mental health and physical health history as requested by BAVC in the application process and have not withheld any information.

I hereby represent and confirm to the BAVC course organizers that any mental/physical health problems are currently stable and that I am fully capable of taking the Vipassana meditation course as described in the Code of Discipline.

I further agree to notify the BAVC course managers and/or conducting teachers immediately if there are any changes in my mental/physical health conditions during the course, and to leave the course if requested to do so by them.

I acknowledge that the course is not a treatment or therapy, the conducting teachers and volunteers are not medical, psychological, or counseling practitioners, or caregivers, and I am responsible for my own mental and physical health.

I consent that the course managers and/or conducting teachers may notify my emergency contacts as well as any health care professionals, and to share with them all relevant mental or physical health information.

I understand that BAVC and its associated organizations will provide me opportunities for follow up questions exclusively about meditation, but will not provide me counseling, coaching, therapy nor medical care of any kind during or after the course ends.

By signing this form, and in consideration of being permitted to participate in this Vipassana meditation course, I knowingly grant to the BAVC organizers of this course, its associated organizations, and teachers, and those old student volunteers serving on the course a complete, total and unequivocal release from any and all liability for any mental or physical experiences, which may occur directly or indirectly, during or after such participation.

Signature	Date
 Student Name Printed	 Date of Birth
Student Name i finteu	Date of Diffi