

Dear Parent/Guardian:

The courses held for children and teenagers in Malaysia offer young people between the ages of 8 to 16 an introduction to Anapana meditation. This technique involves observing the natural breath to concentrate the mind and has nothing to do with any organized religion or sectarian tradition. For this reason, it can be practiced freely by all, does not conflict with any race, community or religion and can prove equally beneficial to all.

Young people who have started practicing Anapana have realized many benefits. Their memory is sharper, their ability to concentrate on and therefore comprehend a subject has improved and they have become calmer.

The intent of this course is serious. It is expected that the children and teenagers who attend the course are able to follow direction.

亲爱的家长/监护人：

儿童与青少年观息法静坐入门课程在马来西亚举办。此课程提供给8岁至16岁的小学生及中学生参加。这静坐方法包括观察自然的呼吸来达到心的专注。它与传统的宗教和派别的组织是没有关联，亦不会跟种族、团体或信仰有任何冲突。因此，它可以让大家自由地学习及肯定让大家得以受益。

那些已开始练习观息法的青少年们已觉察到它所带来的益处。他们的记忆力更强，专注力也增进，因此，他们的理解能力也改进，使得他们变得更平静。

实际上这课程是严谨的。来参加课程的儿童与青少年们必须遵循所引导的方法。

PARENT/GUARDIAN FORM 父母/监护人表格

Your Name 您的姓名: _____

Are you their 与孩子的关系 : Parent 父母 Guardian 监护 Other 其他

Does your child have any medical problems, illnesses or emotional problems that we should know about? 您的孩子是否有任何健康问题、疾病或情绪问题需要让我们知道?

Please give details*请详述: _____

Are they on any regular medication? 他们是否有定期服药? YES 是 NO 否

If YES, please give details* 若是, 请详述: _____

Any special requirements, eg diet? 有没有任何特别的要求, 例: 饮食?

Where will you be during the course? Please give contact address and phone number. 在课程期间, 您会在哪里?
请留下联络地址和电话号码。 _____

Have you discussed the course with your son/daughter? 您是否已和您的儿子/女儿讨论这课程?

Do you think they are ready to participate in the course and fully understand the commitment required? 您认为他们是否愿意参加课程和他们是否已明白所需承担的责任?

*Please make sure your child does not bring games, books, CD/cassette players, etc, to the course. 请确定您的孩子不会带任何游戏、书本、光碟/录音机等来这课程。

*Please attach additional details if necessary. 若有额外资料, 请附加。

If you wish your child to attend this course please sign:

若您允许您的孩子参加此课程, 请签署:

SIGNATURE:

Date:

签名: _____

日期: _____