

**INDEMNITY CUM DECLARATION FORM
LIABILITY RELEASE WAIVER**

I, Mr / Mrs /Ms / _____, a
 MALE FEMALE adult, _____ years of age and of Indian / _____ Nationality, am
travelling from the following address:

To Dhamma Vatika, Palghar Vipassana Centre for a Vipassana Meditation Course
starting from _____

I state that I had applied and accepted willingly the admission to the Vipassana Meditation
Course being held at Dhamma Vatika, Palghar Vipassana Centre, Behind Alyali Cricket Ground, Alyali
Village, Palghar 401404.

I hereby indemnify the organizers and trustees of the Palghar Vipassana Trust and the above
Centre Management of what so ever claims or liabilities and submit the following COVID-19 Liability
Release Waivers to the above mentioned Centre:

1. It is mandatory to install the Aarogya Setu app on your mobile. Have you installed it on your phone?	<input type="checkbox"/> YES <input type="checkbox"/> NO
2. Have you been exposed to any COVID-19 Containment Zone in the last 30 days?	<input type="checkbox"/> YES <input type="checkbox"/> NO
3. Do you live in a Containment Zone?	<input type="checkbox"/> YES <input type="checkbox"/> NO
4. Has anyone in your family, including you, been infected or suffered from COVID-19 in the last 30 days?	<input type="checkbox"/> YES <input type="checkbox"/> NO
5. Have you or any member of your household, travelled by sea or air internationally or domestically within the past 30 days?	<input type="checkbox"/> YES <input type="checkbox"/> NO
6. At present, do you have any symptoms of Diabetes, Hypertension, Asthma, Fever, Cough, Cold and / or diseases related to Lungs, Heart and Respiratory Ailments?	<input type="checkbox"/> YES <input type="checkbox"/> NO
7. Are you suffering from Cancer or Arthritis and / or are taking medicines or steroids for the same?	<input type="checkbox"/> YES <input type="checkbox"/> NO
8. You have to provide a Medical Fitness Certificate issued within 5 days prior to the start of the course, stating that you do not present any COVID-19 symptoms and that you do not suffer from any other illness. Will you be able to provide such a certificate?	<input type="checkbox"/> YES <input type="checkbox"/> NO
9. Does your family support you in your joining this course and will they be able to come to Palghar to help you should an emergency situation arises?	<input type="checkbox"/> YES <input type="checkbox"/> NO
10. You will have to wash your own clothes and utensils. Will you be able to do so?	<input type="checkbox"/> YES <input type="checkbox"/> NO
11. Will you be able to manage a private vehicle to reach the centre and return home after the completion of the course?	<input type="checkbox"/> YES <input type="checkbox"/> NO
12. Students are being accommodated in single rooms only. Will you be able to stay alone?	<input type="checkbox"/> YES <input type="checkbox"/> NO
13. During examination upon arrival at the centre, if you display any symptoms mentioned in Question 6 above, you will not be allowed to participate in the course and will be sent back. Do you agree to this?	<input type="checkbox"/> YES <input type="checkbox"/> NO

