### ENROLLMENT AND RELEASE OF LIABILITY FOR THE KAI CHI DO RETREAT

Agreements are mutual understandings between people, that define intentions and inform expectations. To create a safe environment, establish trust, and facilitate harmony of purpose in the Kai Chi Do One Day Retreat, we request your consent to the following understandings and agreements:

You must be at least 18 years of age to participate in the Kai Chi Do One Day Retreat, or be accompanied by a parent or guardian who participates in the Retreat.

You understand that you are not under any obligation of any kind to participate in this event.

You understand that Kai Chi Do and breathwork meditation are fitness and personal growth services designed to enhance quality of life. They are not health care services nor psychotherapy. The Kai Chi Do One Day Retreat is a personal growth event; It is not treatment.

You agree that you will not use alcohol or any illicit substance during the Kai Chi Do One Day Retreat.

You agree to maintain confidentiality of all comments shared by the workshop leader and participants.

The Kai Chi Do One Day Retreat includes physical exercise, guided connected breathing, and meditation. Some people find these exercises physically demanding or strenuous. The exercises may also heighten awareness of your emotions. You agree to modify these exercises and processes to accommodate your own needs or physical limitations.

You agree to assume full and complete responsibility for your own well-being throughout the Kai Chi Do One Day Retreat.

#### Waiver of Liability:

By signing below I hereby agree on behalf of myself, my heirs, my assigns, executors, and personal representatives, to hold harmless Charles Robinson and Kai Chi Do Inc., their officers, directors, agents, employees, chaperones, and representatives from any and all liability claims, losses or damages arising from or in connection with participation in this retreat. To the best of my knowledge, I am in good health and physically able to participate in this activity. I have read this waiver of liability, understand its meaning, and agree to its conditions.

#### DATE

SIGNATURE

## PLEASE PRINT NAME

# EMAIL / PHONE

Please complete and sign and fax to us at 1-800-272-4311 or scan/email to susan@kaichido.com