

## Registration Form

*Symposium for Integrative Health Tai Chi Retreat  
Sept 8, 9, and 10, 2017*

*held at Maris Stella Retreat Center,  
Harvey Cedars, Long Beach Island, NJ*

More details and online payment can be found on <http://SyIHTQ.org>

### Registration Category:

- |   |  |
|---|--|
| <input type="checkbox"/> Participant                        | <input type="checkbox"/> Volunteer   |
| <input type="checkbox"/> Participant with Promotion Code    | <input type="checkbox"/> Sponsor   |
| <input type="checkbox"/> Presenter or Mini-Workshop Leader  | <input type="checkbox"/> Guest of Sponsor  |
| <input type="checkbox"/> Guest of Presenter/Workshop Leader | <input type="checkbox"/> Organizer/Steering Committee or<br>Long Workshop Leader |
| <input type="checkbox"/> Sister Participant                 |  |

Name \_\_\_\_\_

Street Address and/or PO Box number \_\_\_\_\_

City \_\_\_\_\_ State or Province \_\_\_\_\_ Postal Code \_\_\_\_\_ Country \_\_\_\_\_

Day Phone \_\_\_\_\_ Evening Phone \_\_\_\_\_

Email Address \_\_\_\_\_

School or Club or Organization Affiliation (or promotion code if applicable) \_\_\_\_\_

If applicable, ID code (usually 6 letters and 3 numbers) \_\_\_\_\_

Registration Date: \_\_\_\_\_ (Before June 30, 2017? \_\_\_\_\_)

Promo code? \_\_\_\_\_  
(If your registration comes before June 30, or you have a promo code,  
use the discounted price from the matrix.)

### Send form and payment to:

**HPL Institute, PO Box 564, Douglassville, PA 19518-0564.**

*For multiple registrations, please fill out multiple forms.*

**We are a 501(c)3 non-profit organization.**

**Estimate total price based on pricing (over).**

Send payment with form in postal mail or email ([Symposium@HPLConsortium.com](mailto:Symposium@HPLConsortium.com))  
or pay online; payment must be received by September 1, 2017  
or you will be asked to pay again at the door.

Mail at least by August 17 to be sure we get it (our mail is very slow).

## Registration for Sept 8-10, 2017

- Symposium for Integrative Health & Tai Chi Retreat 3 Day Pass**  
All activities, Lodging, & Banquet September 8-10, 2017
- Symposium for Integrative Health & Tai Chi Retreat - Partial**
- Workshops - Friday Only - Friday, September 8, 2017, 8:30 AM to 5:00 PM
  - Workshops - Saturday Only - Saturday, September 9, 2017, 8:30 AM to 5:00 PM
  - Workshops - Sunday Only - Sunday, September 10, 2017, 8:30 AM to 3:30 PM
  - Push Hands Meet – Friday Evening, 8:00-10:00 PM
  - Meditative Activities** (Check all that apply – there is no fee to join these activities.)  
Sunrise Qigong on the beach \_\_\_\_\_ Friday \_\_\_\_\_ Saturday \_\_\_\_\_ Sunday  
Sunset Qigong on the bay \_\_\_\_\_ Friday \_\_\_\_\_ Saturday \_\_\_\_\_ Sunday  
Friday evening spiritual seminars \_\_\_\_\_ Friday evening Labyrinth walk \_\_\_\_\_
  - Saturday Film Showing "Tai Chi and Cancer Care", Talkback session, and Reception**  
Dr. Penelope Klein will show her documentary and share how the film was made. Reception to follow.
- Lodging for Friday and Saturday night.** Choose below (number of beds after room name):  
How many beds? \_\_\_\_\_  
Which room? \_\_\_\_\_  
Sun (2), Wu Hao (2), Wu (2), Chen (3), Yang (4), Zhang Sanfeng (2), Yang Luchan (3), Chen Wangting (4). (Please keep in mind that you may not be able to get your requested room. Beds not available for just one night.)
- Meals (choose below)**
- |          |                 |             |                                    |
|----------|-----------------|-------------|------------------------------------|
| Friday   | _____ Breakfast | _____ Lunch | _____ Dinner                       |
| Saturday | _____ Breakfast | _____ Lunch |                                    |
| Sunday   | _____ Breakfast | _____ Lunch | _____ All Meals (Fri to Sun Lunch) |
- (Saturday and Sunday dinners are listed separately below)*
- Saturday Evening Banquet September 10, 2017, 5:30 PM**  
At this Banquet participants, family and friends will be honoring the sponsors and leaders, those people who helped make this event happen. Dress is "Formal Martial Arts" dress which means either native dress of the homeland of your martial art, school or club uniforms, or black tie.
- Leaders, Volunteers, and Sponsors Dinner Sunday, September 10, 2017, 4:30**  
This event is for those who presented, led a workshop, sponsored, or helped out as a volunteer or part of the organizing committee. It will be held at a local restaurant, and then followed by an organizational meeting and then Qigong on the Bay. No charge.

To estimate your price, please review the pricing matrix on the next page.

### Payment Options

Enclosed is payment in the amount of \$ \_\_\_\_\_  
 Check  Credit Card  Cash

Account # \_\_\_\_\_  
 MasterCard  Visa

Expiration Date \_\_\_\_\_

Code Number (3 or 4 digit number on back of card) \_\_\_\_\_

Signature: \_\_\_\_\_ Date \_\_\_\_\_

**Pricing Estimation Matrix.** Please circle the prices that you used in your calculation above. We may call in order to clarify your registration.

<b>Type of Registration</b>	<b>Full Weekend Pass, All Events, Lodging, &amp; Banquet</b>	<b>Festival/Retreat Workshops &amp; Presentations Friday, Saturday, Sunday (no lodgings)</b>	<b>Banquet Saturday night</b>	<b>Friday and Saturday Lodgings (either St. Anne or Holy Family) - per bed</b>	<b>Festival/Retreat Workshops &amp; Presentations Friday or Sunday</b>	<b>Festival Workshops &amp; Presentations Saturday</b>
Participant	\$360.00	\$250.00	\$60.00	\$150.00	\$80.00	\$100.00
Participant with Promo Code or early bird discount	\$325.00	\$235.00	\$50.00	\$125.00	\$75.00	\$95.00
Presenter, Mini-workshop leader, Guest of workshop leader or sponsor, Volunteer, Sister.	\$220.00	\$100.00	\$0.00	\$110.00	\$30.00	\$40.00

	<b>Single Presentation or Workshop</b>	<b>Meal Pass - all meals</b>	<b>Meals - individual</b>	<b>Backpack</b>	<b>Full body Massage - 60 minutes</b>
Participant	\$25.00	\$90.00	\$16.00	\$35.00	\$75.00
Participant with Promo Code or early bird discount	\$25.00	\$90.00	\$16.00	\$20.00	\$60.00
Presenter, Mini-workshop leader, Guest of workshop leader or sponsor, Volunteer, Sister.	\$25.00	\$90.00	\$16.00	\$20.00	\$50.00

To register for a single presentation or workshop, please identify which workshop you are registering for:

Workshop Leader: \_\_\_\_\_ Date and Time: \_\_\_\_\_

Any other details we should know? Any special dietary restrictions or handicap accessible needs?

(Please note that the beach is not handicap accessible; the dunes are very high and the only way to the beach is to walk over a steep incline. The bay is handicap accessible.

The conference center is handicap accessible, but the on-site housing may not be.)

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# Waiver And Release Of Liability And Agreement to Participate

HPL 501c3 Institute Waiver Form

PO Box 564, Douglassville, PA 19518

www.HPL501c3.org

484-332-3331

IN CONSIDERATION OF BEING PERMITTED TO PARTICIPATE IN ANY WAY, INCLUDING TRAVEL TO AND FROM THE *Symposium for Integrative Health Tai Chi Retreat*, I hereby:

1. Acknowledge that I may be doing Martial Arts (including Taijiquan, Bagua, Xingyi, Push Hands, Sword, Staff, other weapons forms and other related activities including Yoga, Pilates, Qigong, etc. ) and understand the rules governing these activities and the importance of safety at all times.
2. Acknowledge and fully understand that I will be engaging in a contact sport that might result in serious injury; including permanent disability or death, and severe social and economic losses due to not only my own actions, inactions or negligence, but also to the action, inaction, or negligence of others. Further, I acknowledge that there may be other risks not known to me or not reasonably foreseeable at this time.
4. Assume all risk and accept personal responsibility for the damages following such injury, permanent liability or death. I fully understand the risks involved in the event. I will not engage in activities that are beyond my capabilities or that might in any way be injurious to my health.
5. Release, waiver and discharge and covenant not to sue any of the organizing members or sponsoring organizations, their affiliated clubs, their respective administrators, directors, agents, teachers, and other employees or volunteers of the organization, event officials, medical personnel, other participants, their parents, guardian(s), supervisors and coaches, sponsoring agencies, sponsors, advertisers, and if applicable, owners, lessors, and lessees of premises used to conduct the event, all of whom are hereinafter referred to as "releasee", from any and all claims, demands, losses, or damages on account of injury, including permanent injury and death or damage to property, caused or alleged to be caused in whole or in part by the negligence of the releasee or otherwise.
6. I understand the photographs and videos will be taken of participants, and I agree to allow my likeness in either photo or video to be using for marketing purposes for any of the programs under or related to HPL501c3 Institute or any of the organizations involved in this event.

Parent(s) or legal guardian(s) of minor participants (age 17 or below) additionally agree that they instruct the minor participant to the above warnings and conditions and their ramifications, and that they consent to the minor's participation.

I HAVE READ THE ABOVE WAIVER AND RELEASE, UNDERSTAND THAT I GIVE UP SUBSTANTIAL RIGHTS BY AGREEING TO IT, AND KNOWING THIS, AGREE TO IT VOLUNTARILY. I AGREE TO PARTICIPATE KNOWING THE RISK AND CONDITIONS INVOLVED AND DO SO ENTIRELY ON MY OWN FREE WILL.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_