



Application for Ceremony

I would like to be admitted to the following ceremony by submitting this application. PLEASE PRINT.

Name		Center / Institute	
Date of Birth	/ / <input type="checkbox"/> Female <input type="checkbox"/> Male	Occupation	
Street Address			
City		State / Zip	
Phone	(Mobile)	Business/Home	
E-mail		Fax	

In appreciation of this ceremony, I would like to donate the following amount to Tao Fellowship.

Ceremony Name			
Date of Participation	From ____ / ____ / ____ - ____ / ____ / ____ (DD/MM/YYYY)		
Donation (\$)	\$_____ (Check should be made payable to "Tao Fellowship")		
Paid by	Check <input type="checkbox"/> MasterCard <input type="checkbox"/> Visa <input type="checkbox"/> AE <input type="checkbox"/> Other (_____)		
Card No	_____	Exp Date	Verification #:
Note: Card holder's name, signature, and billing address required if different from the applicant's			
Name		Signature	
Billing Address			

Rooming: Please contact the Ceremony Coordinator if you have any special request for your rooming.

Refunds: No cancellation or refund is allowed once the donation has been submitted.

Statement of purpose and compliance: I acknowledge that the purpose of my visit to Sedona Mago Retreat is to learn about the principles of Taoism and participate in its practices. I acknowledge that I was informed of the rules and guidelines of Tao Fellowship and understand that I am required to follow the rules and guidelines during my stay in the premises of Tao Fellowship.

Donation for non material benefit: Tao Fellowship is a non-profit organization under the category of 501(c)(3) public charity. A donation to Tao Fellowship is tax-deductible as a charitable contribution for which donor receives no goods or services in whole or in part in return except for the intangible spiritual benefits unless specified otherwise in the donation receipt.

Authorization and release: I (the undersigned) authorize recording, by audio, video, photo camera, or other means, my participation in all activities of the program including the right to copyright such recordings, and to use and publish them, in whole or in part. This authorization expressly includes the right to record, reproduce or otherwise use the undersigned individual's face, likeness and voice.

Waiver of liability: I fully acknowledge that participation in the above said program includes but is not limited to physical exercise which could cause injury to participants. I am voluntarily participating in these activities and assume all risks of injury to myself that might occur and I acknowledge it is my responsibility to decide whether I am physically fit for participation. I hereby waive any and all claims of any nature whatsoever, and agree not to hold Tao Fellowship, its contractors, and all the other entities participating in the program delivery, including their employees, agents, representatives, partners, instructors, volunteers or staff, responsible for any injuries suffered by me or loss which I may incur that is caused in whole or in part, may arise, occur, or be attributable to but not limited to the following; (1) a breach of any representation, warranty, or promise made by me; (2) any misstatements made by me; (3) my failure to follow the instructions of my instructors; (4) my failure to disclose in writing any physical impairment or condition of mine; (5) my inability or failure to satisfactorily complete the program; (6) the housing facilities and/or accommodations arranged for me during the program; (7) the course offered and standard of instruction; (8) interruption or termination of the program due to illness, acts of God, civil unrest or any other unforeseen circumstances; and (9) any accident, injury or loss that occurs off of or outside of the physical premises of Tao Fellowship, its contractors, and all the other entities participating in the program delivery.

I have read, understand and agree to all of the terms and conditions of this application. I represent and warrant (1) that I have been examined by a licensed physician within the past six months and found to be in suitable condition for all activities that I am to learn and perform during the program and (2) that I will faithfully follow all instructions given by my instructors.

Date

Signature