



# JOURNEY INTO DAOIST MYSTICISM: APRIL 15 – 27

## Registration Form

Please fill out, sign and return by mail or fax.

### AIR TRANSPORTATION

- Individuals are responsible for their own international travel expenses.
- Individuals are responsible for their own China entry visa.

### Please choose from the following:

Trip fees include one T-Shirt. Please designate size and sleeve length:

\_\_\_\_\_ Size  
\_\_\_\_\_ Long or Short sleeve

Additional shirts are available:  
• Short Sleeve \$20  
• Long Sleeve \$25

Double Occupancy \$2900 \$ \_\_\_\_\_  
Single Occupancy \$3350 \$ \_\_\_\_\_

Additional Shirts \$ \_\_\_\_\_

TOTAL: \$ \_\_\_\_\_  
DEPOSIT: \$ \_\_\_\_\_  
BALANCE: \$ \_\_\_\_\_

\*\* \$1000 non-refundable deposit is due by February 23, 2012.  
Balance is due by March 9, 2012.

\*\* *No refunds within 30 days (March 15, 2012) of the trip.*

Please choose form of payment (A or B):

A. \_\_\_\_\_ Check/Money order  
Make checks payable to:  
**Temple of Peace and Virtue**

B. \_\_\_\_\_ MasterCard \_\_\_\_\_ Visa

Account Number \_\_\_\_\_ Exp. \_\_\_\_\_

CVVC (3 digit code on back of CC) \_\_\_\_\_

Name as it appears on card \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

### ASSUMPTION OF RISK AND WAIVER

The undersigned, as a registrant for a trip arranged by Dr. Bernard Shannon, Linda Burquez, The Temple of Peace and Virtue, and the International Institute of Medical Qigong, expressly acknowledges that they are aware that this trip or tour involves certain risks and dangers that include, but are not limited to, the hazards of traveling in foreign countries and wilderness areas, the possibility that an accident or illness could occur in remote places without access to immediate or timely medical treatment or facilities, injuries, political instability, forces of nature, and travel by air, train, automobile, bus, or other vehicle or conveyance.

With knowledge of the foregoing, I assume all of such risks. Moreover, I am in good health and am able to participate in such trip or tour and the activities related thereto, except as otherwise disclosed in writing on my registration form.

I hereby give to Dr. Bernard Shannon and those acting with their authority and permission: the unrestricted right and permission to copyright, use, and publish photographic portraits or pictures of me or in which I may be included intact or in part, composite or distorted in character or form, without restriction as to changes or transformations in conjunction with my own or a fictitious name, or reproduction hereof in color or otherwise, made through any and all media now or hereafter known for art, promotion, advertising, or any other purpose whatsoever. I hereby relinquish any right that I may have to examine or approve the completed product or products or the advertising copy or printed matter that may be used in conjunction therewith or the use to which it may be applied.

In consideration of, and as part payment for the right to participate in such trip or tour and/or in other activities, I have and do hereby waive, release, and hold harmless Dr. Bernard Shannon, Linda Burquez, The Temple of Peace and Virtue, and the International Institute of Medical Qigong, its employees and agents, and tour leaders, hired in connection with such trip or tour from any and all liability, actions, causes of actions, debts, claims, damages, costs, losses, disputes, and liens whatsoever on account of, or in any way arising out of, personal injury, loss of life, loss or damage to property, illness, and any consequences thereof, directly or indirectly, resulting from, incident to, in connection with, or arising out of the trip or tour taken by registrant. The terms herein shall serve as an assumption of risk, waiver, release, and indemnity for the undersigned.

I have read and accept the above Assumption of Risk, Waiver and Release, which contains the entire and final agreement related to the subject matter hereof. This instrument shall be governed by and construed under the laws of the State of California, and venue of enforcement of this instrument shall be in Riverside County, California.

Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_