

QINWAY RETREAT REGISTRATION

Classic Magnetic '3 in 1' Retreat 3.3D

Today's Date: ____ Retreat Date: ____

(Formal registered after the registration fee being paid)

Filling Out the Form (better with more details)

Name: (Please Attach PhotoID)	Sex:	Birth Date: Your Age:	SSN:
Address:			E-mail :
Cellular Phone: Home Phone:	Website :	Marriage :	Race:
Job:	Annual Salary:	Any Children? How Many & How Old?	Mother Country:
Religion:	Lanuguage:	Driver License#:	Education : Major:
Height:	Weight Before: (at Home Current)	Blood Pressure: (at Home Current)	Sugar Blood Nomal: () Yes If No, Please List: () No
List Your Health Problems You Wish to Solve? (You have to list & tell Grandmaster if you really want to get healing.)			

List Major Family Member Health Problems:		
Any History of Very Unstable Emotion or Depression?		
Can You Take Care of Yourself During the Retreat & Bigu Program?		
Who Lives with You (including pets) and Any Health Problem?		
Does Family Member(s) Support Your Bigu & Retreat?		
Have You Learned or Used Any Natural Healing Methods & Products? (Including Qinway's)		
If Yes, When? Where? Any Experience? Please List Method Name		
Any Private Info You Wish Grandmaster to Know & Get Help?		
Diet <input type="checkbox"/> Meat & Veggie <input type="checkbox"/> Veggie	Bowel <input type="checkbox"/> Irregular Movements <input type="checkbox"/> Regular	Are You on Medication? <input type="checkbox"/> Yes If Yes, Please Indicate: <input type="checkbox"/> No
How Did You Hear Qinway?	by Friend, Who? Internet:	Did You Prepay Individual Healing & Consultation?

For those who have heart discomfort, high blood pressure or a history of related diseases, please submit your LDL-c, Triglyceride, and echocardiogram information. (You can add another page)

Special Note

1) About Fee:

Formal registered after the registration fee being paid, prepay below 2 items will help Grandmaster pick up signal earlier for you and save your retreat valuable time for detail preparation:

- Did you pay the "Classic Magnetic '3 in1' Retreat" registration fee?
- Do you wish to prepay the "Individual Consultation & Healing"? (both sections offer to the retreat students Only).
- Do you wish to prepay retreat section B which is the "Bigu Remote Healing Package 108 Days"? (great for removing the root of diseases and building good energy root foundation)

Please check the registration detail information: <http://www.qinway.org/Qi-Retreat-Registration.htm>

- 2) When we receive the fee & form, Grandmaster will start immediately helping you set up the individual healing signal with the system.
- 3) This form belongs to private individual signal system, and it is only belongs to you. To protect your private Qi field, it cannot be shared or viewed by others.
- 4) This retreat will temporarily not accept students who with serious mental problems, cancers, some infectious diseases, unless you have permission from Grandmaster.
- 5) Why shall the student submit the social security number? The retreat has special arrangement as "close qi field", all the students will be together, and the sleep arrangement will follow united Yin/Yang Qi field. Since the students are coming from different state or country and we don't know their background, in order to protect everyone's safety, we ask each student to submit his ID, including the SSN. All the information are confidential and will not to be released to any third party.
- 6) When filling out the form, please direct email to: 930@Qinway.org.

*The information that I have provided on this form is true and accurate. I have read all Qinway's information and guidelines. I determine to participate the retreat. I understand and agree that the registration fee is non-refundable.

PRINT YOUR NAME:

SIGN HERE:

DATE: