**Tao Garden bl**

##### universal blUniversal Healing Tao System

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***UHTS Training Registration Form***

***Please fill out this enrollment form as a step toward instruction in the practices of the Universal Healing Tao as taught by Master Chia May 25th to May 27th 2019 at Portland, Oregon USA. This information will be kept confidential. (Please Print)***

***Name Age \_\_\_\_ Marital Status***

# *Street*

***City State Country Zip***

***Home/Work Phone Email***

***Occupation Date of Birth***

***Permanent Address (if different from above):***

***Street***

***City State Country Zip***

***How were you referred to this Universal Tao class? Ad Flyer Friend Other (specify)***

***Previous classes attended: Biography & schooling:***

***I am aware that Universal Healing Tao practices are primarily an educational process enabling me to care for myself in a more informed way. I know that I am responsible for my own physical, emotional, mental, and spiritual well-being. This training in Universal Healing Tao will enable me to better understand myself and become capable of functioning more fully as a complete being in harmony with myself. I am not here to be treated for any illness, disease, or deformity. These UHT practices are an element of the Universal Healing Tao System. I agree that I will not publish, teach, or in any form or way attempt to impart the principles of the Universal Healing Tao to the public, until such time as I have received personally from Master Mantak Chia, or his representative, the training necessary to become a qualified instructor/practitioner of the Universal Healing Tao System.***

***Date Signature***