

Licensed Reiki Master Teacher (LRMT) Vacation Maui

January 6-12, 2027

Release of Liability Waiver Form

Date _____
Name: _____ Address: _____
City: _____ State/Province: _____ Zip/Postal: _____ Country: _____
Phone: _____ Emergency Contact Person: _____
Emergency Phone: _____ Your Doctor: _____
Dr. Phone: _____ Hospital: _____
Insurance Type _____ Insurance Phone _____
Group # or ID _____ I have read the LRMT Hawaii Vacation Document and agree with it. ____ (please check)

I understand that the LRMT Vacation I attend, in Hana, Hawaii may involve mental, emotional, or spiritual exercises that may create various levels of stress or challenges for me. I understand that the training and activities may pose a risk of physical or other injury to others and myself. I understand that during the training or after I may go on my own or with other members, hiking, swimming, boating, snorkeling, or be involved with other physical activities. I understand and acknowledge that my participation in the vacation and in every separate part thereof as well as in any activities during the vacation or with members of the vacation is purely voluntary and that at all times, I will be free to choose NOT to participate in any part or all of the vacation and activities. I acknowledge my responsibility for exercising my judgment and initiative in choosing what parts of the vacation, if any, I will participate in. I acknowledge that my choices and my actions pose a risk of physical or other injury to myself, or others. By this consent, I knowingly and voluntarily assume the risk of any physical or other injury either to myself or caused to others by me during the vacation and or activities or with any members of the vacation during or after the vacation. I hereby release The LRMTs, The International Center for Reiki Training, Vision Publications, William Lee Rand, and all their staff from any liability for physical and other injuries to myself. I hereby agree to indemnify and hold harmless The LRMTs, The International Center for Reiki Training, Vision Publications, William Lee Rand, and all their staff of all liability, claims, suits, and damages for any physical or other injury to myself or any injury to others caused by me.

I acknowledge that the activities described above may be more physically, mentally, or emotionally demanding than my usual activities. To the extent that I have any physical, mental, or emotional disability that would impair my ability to participate in the activities and exercises described above, I have made a written reference to each such disability on the reverse side of this page, and if I have made no such reference to any such disability, I represent to The LRMTs, The International Center for Reiki Training, Vision Publications, William Lee Rand and all their staff that I have none.

I hereby authorize The LRMTs, The International Center for Reiki Training, Vision Publications, William Lee Rand, and any of their staff to take any reasonable steps on my behalf in the case of any physical or other injury or condition I might suffer during the event I am attending The International Center for Reiki Training, Vision Publications, William Lee Rand and any of their staff may apply emergency first aid, engage physicians of any kind, nursing services, ambulance services, paramedic services or any other service or personnel that in the sole discretion and judgment of The LRMTs, The International Center for Reiki Training, Vision Publications, William Lee Rand, and any of their staff may be deemed reasonable or necessary. I hereby agree to indemnify and hold harmless The LRMTs, The International Center for Reiki Training, Vision Publications, William Lee Rand, and any of their staff of and from any liability, claims, suits, and damages, including but without limitation, the cost, arising out of or concerning the engagement of such services and/or personnel on my behalf. Further, I hereby knowingly and voluntarily release The LRMTs, The International Center for Reiki Training, Vision Publications, William Lee Rand, and any of their staff from any liability for any physical or other injury that I may suffer as a result of their engagement of such services and/or personnel on my behalf.

Photo Release

I hereby grant permission to William Lee Rand, Vision Publications, and The International Center for Reiki Training to use my photograph and/or video image and recording on any of its World Wide Web sites or affiliated websites and/or in the Reiki News Magazine without further consideration, and I acknowledge William Lee Rand's, Vision Publications' and The International Center for Reiki Training's right to crop or treat the photograph and video image and recording at its discretion. I also acknowledge that William Lee Rand, Vision Publications and The International Center for Reiki Training may choose not to use my photo at this time but may do so at its own discretion at a later date.

I also understand that once my image and/or video recording is posted on a website, the image and/or video recording can be downloaded by any computer user. Therefore, I agree to indemnify and hold harmless from any claims the following: William Lee Rand, Vision Publications, Reiki News Magazine, The International Center for Reiki Training.

We reserve the right to discontinue the use of photos and video images without notice.

Signed: _____ Print Name _____ Date: _____