Satvatove INSTITUTE

- Spiritually-Based Personal And Group Transformation
Through Empowered Communication,
Courageous Introspection And Purposeful Action

Refund and Cancellation Policy for Satvatove Institute Seminars in North Florida

Seminar fees, minus a 20% administrative fee, may be refunded up to two weeks before the start of a Satvatove seminar. This includes the Satvatove Foundational Seminar, the Satvatove Advanced Seminar, and Satvatove 3: An Adventure in Conscious Living. In case of cancellation less than two weeks before the seminar, no refund will be provided. However, registration may be transferable to another eligible participant at the consent of the facilitator(s), or to another Satvatove seminar, for the same participant, also at the consent of the facilitator(s).

For those who register for the combined Satvatove Foundational / Advanced Seminar, "the start" of the seminar means day 1 of the Foundational Seminar. Thus, for the combined Foundational / Advanced, refunds can be given if cancellation is done at least two weeks prior to day 1 of the Foundational Seminar.

_____
Print Name

_____ _____
Signature Date

Confidential Health Information

Please answer all of the following questions completely. Your answers will be kept confidential.

The information you provide here will enable our facilitators and staff to better support your participation. If during the workshop you find yourself feeling uncomfortable to an excessive degree, you should report this immediately to the facilitator or to a staff member

If you have questions about the appropriateness of your participation in this Satvatove course, please consult a trained professional.

PHYSICAL AND MENTAL HEALTH SCREENING

NAME _____ DATE OF BIRTH _____

Telephone _____ Email_____

1. Have you ever had (or do you have) Heart attack ___ High blood pressure__ Heart surgery __ Epilepsy __ Diabetes __ other_____
2. Are you at this time under doctor's care for a serious physical ailment? YES __ NO__

   If yes, what? _____
3. Are you under the care of a mental health professional such as a psychiatrist or psychologist at this time? YES__ NO__

   If yes, explain: _____
4. Are you taking prescribed medication? YES___ NO___

   If yes, what, and for what disorder? _____
5. Have you ever had a "nervous breakdown?" YES___ NO___

   If yes, explain: _____
6. Have you ever been hospitalized for psychiatric care or for mental disorder? YES__ NO__

   If yes, when and for what reason?_____
7. Are you pregnant? YES__ NO__

   How many months? _____
8. Do you have any physical limitation that you believe may be an obstacle to your participation in this Satvatove course? YES__ NO__

   If yes, explain: _____

EMERGENCY CONTACT :

NAME (PRINT)_____ PHONE_____

Hold Harmless/Release
& Arbitration Agreement

Note: The following acknowledgement of risk and assumption of personal liability will not be accepted by Satvatove if there are any changes, enhancements, or notations on this page. This form must be signed "as is" for admittance to the Satvatove classes.

I understand that the Satvatove courses are an experiential, philosophical, educational program that may or may not assist in personal growth. I understand too that although Satvatove has taken precautions to provide proper organization, supervision, ground rules, instruction and equipment for each course, it is impossible for Satvatove to guarantee absolute safety, confidentiality and well-being. Although Satvatove requires each participant in the Foundational, Advanced and Satvatove 3: Adventure in Conscious Living Courses to commit to confidentiality, I understand that Satvatove cannot guarantee that all participants will comply with this commitment to confidentiality. Also, I understand that I am responsible for my own safety and well-being and I assume that responsibility. This includes responsibility for my emotional, physical, medical, and spiritual well-being. I further understand that several of the processes in the program/training involve sharing and I may experience deep emotions and possibly emotional stress, anxiety, tears, physical discomfort or exhaustion. I have accepted responsibility to verify with my physician that I have no physical, psychological, psychiatric or mental problems that would prohibit my participation in the course. I realize that failure to disclose information could result in harm to fellow participants and myself, and I agree to indemnify, defend and hold Satvatove harmless if all relevant information is not disclosed.

I agree to comply with the instructions and directions of Satvatove staff members during the course. Furthermore, I agree to indemnify, defend and hold Satvatove and its staff, volunteers and faculty harmless for any threat or injury to my safety and well-being, including all loss, damages, costs and expenses, and legal fees, from any such threat or injury to my safety and well- being.

I understand that Satvatove has no way to ensure in advance whether the Satvatove Foundational Course, the Satvatove Advanced Course or the Satvatove 3: Adventure in Conscious Living Course is appropriate for me. Also, I understand that Satvatove is not able to determine what effect some portions of the Foundational Course, Advanced Course or Satvatove 3: Adventure in Conscious Living Course may have on me.

I understand that the Satvatove Foundational Course, the Satvatove Advanced Course and the Satvatove 3: Adventure in Conscious Living Course are intense, highly participatory workshops designed to deal with life issues in an honest and meaningful way. I understand that in the Satvatove Courses I will be requested to participate fully, and I may find the nature of this participation to be emotionally, physically, spiritually and intellectually challenging.

Initial here _____

I understand and accept that it is my responsibility to get sufficient rest and nutritious food during the days of the Foundational Course, the Advanced Course and the Satvatove 3: Adventure in Conscious Living Course. Also, I understand that during the days of the Foundational Course, the Advanced Course and the Satvatove 3: Adventure in Conscious Living Course, Satvatove recommends that I not schedule other obligations, such as job- or school-related, due to the intense nature of the courses.

I understand that mental health disorders are not addressed in the Satvatove Courses.

By signing this agreement I attest that any doubts I may have had about my mental, emotional, or physical ability to handle the Satvatove Foundational Course, the Satvatove Advanced Course or the Satvatove 3: Adventure in Conscious Living Course were resolved by me by consulting appropriate professionals in their respective fields.

I understand that I am free to leave the Foundational Course, the Advanced Course or the Satvatove 3: Adventure in Conscious Living Course at any time for any reason. If I feel I need assistance from anyone, such as a mental health professional or a physician, or any other person, I take full responsibility for leaving the Foundational Course, the Advanced Course or the Satvatove 3: Adventure in Conscious Living Course and obtaining that assistance for myself. I understand that, if I do leave the seminar at any point, I may, at the discretion of the facilitator, not be permitted to return to the seminar.

I am fully aware that participating in the Satvatove Foundational Course, the Satvatove Advanced Course or the Satvatove 3: Adventure in Conscious Living Course may contain risks of physical and psychological injury. I voluntarily and freely choose to incur and assume any and all such risks and dangers.

I understand that photo, audio and/or video recordings of the Satvatove Foundational Course, the Satvatove Advanced Course or the Satvatove 3: Adventure in Conscious Living Course or any part thereof may be taken. I understand that such recorded material is the property of Satvatove Institute and I accept that it is the right of Satvatove Institute to use such material freely according to the discretion of the directors of the Institute.

I understand and agree that I am waiving and forever abandoning any claims for punitive damages against Satvatove. I voluntarily choose to give up this right.

I agree that any controversy or claim not effectively released in this Agreement arising out of or relating to my participation in the Satvatove training program will be determined by submission to arbitration in accordance with the rules of the American Arbitration Association and not by lawsuit or resort to court process (except as applicable law provides for judicial review of arbitration proceedings). This agreement includes arbitration of claims against Satvatove that there have been any wrongful acts or omissions by Satvatove, intentional or otherwise. The decision of the arbitrators may be entered in any court having jurisdiction in such matters.

Participant Name: (printed) _____

Date: _____ (mm-dd-yyyy)

Participant Signature: _____

Ground Rules for the Satvatove Institute Foundational Seminar

Seminar participants will be asked to agree to these ground rules shortly after the start of the seminar. Agreement to the ground rules is a requirement for attending the Satvatove Foundational Seminar. The purpose of the ground rules is to support the group to work cooperatively within a consistent framework. If you have any questions about the ground rules, contact the course organizer.

1) Maintain confidentiality about what others share during the course.

2) You are encouraged to share the realizations you experienced in the seminar processes, and we ask that you agree to maintain confidentiality about the details of the structured processes you experience during the course.

3) Turn off beepers, cell phones and other electronic devices during course hours.

4) No eating or drinking in the seminar room, except for liquid in closed containers. There will be regular breaks, of about 10-25 minutes, approximately every 1.5-3 hours.

5) Attend every session of each day of the course.

6) Arrive on time for every session of the course.