

PRANIC HEALING HOME

(AC – 11, 2ND Avenue, Anna Nagar, Chennai – 600 040)

Affiliated to World Pranic Healing Foundation Pvt. Ltd., & IIS, Manila

ARHATIC YOGA PREPERATORY-II

(Please tick the appropriate box)

- Fresher
- Reviewer

Please paste
your recent
photo

NAME (in CAPITALS):

AGE: _____ **GENDER [M/F]:** _____ **MARITAL STATUS [Single/Married]:** _____

MAILING ADDRESS: (Complete details with pin code) _____

Mobile No.: _____ **Landline No.** _____

E-MAIL: _____

Details of Pranic Healing Courses you have taken:

Course	Place Conducted	Trainer	Year & Date
Basic Pranic Healing			
Advance Pranic Healing			
Pranic Psychotherapy			
Achieving Oneness with Higher Soul			
Arhatic Prep II (for reviewers)			

**Fresher: Photocopy of Pranic Psychotherapy and Achieving Oneness with the Higher Soul Certificates should be attached.

**Reviewers: Photocopy of Arhatic Yoga Prep II Certificate should be attached.

DECLARATION

I am participating in this seminar at my own risk and of my own free will. I take full responsibility for participating in this programme. I release all instructors, organisers and assistants of this seminar from all damages whatsoever and waive all rights to compensation in case of injury. I declare that I am physically and mentally able to participate in this seminar and will keep confidential all the proceedings. I verify that the information given above is true to the best of my knowledge.

I am enclosing cash/DD for Rs _____ for participating in this seminar.

(DD/Cheque No. _____ Bank _____ Dated _____)

(DD/Cheque shall be in favour of "Pranic Healing Home", payable at Chennai.)

Date: _____

Place: _____

Signature

VOW OF SECRECY

I, (name)

having had the privilege of being accepted as a student in MASTER CHOA KOK SUI's

(Specify course name) _____ course,
do solemnly swear to keep secret and confidential all the sacred teachings taught in this course.

On my honour, I sincerely promise to preserve these teachings in their purest form and practice them in the proper and correct manner guided by the Golden Rules and the practice of the Five Arhatic Virtues taught by Master Choa Kok Sui. I also promise to prevent misuse or incorrect practice of these teachings by persons who have not been adequately instructed.

With the Lord God as my witness and my Higher Self as my guide, I shall uphold this Vow of Secrecy and I will not divulge to anybody under any circumstances verbally or through the reproduction of written material or through some other form in whole or in part any of the teachings, principles and techniques from this course.

I make this solemn vow freely and voluntarily with no mental reservation or purpose of evasion. I hereby affix my signature.

Date: _____ in (City) _____, India .Signature: _____