



# PERSONAL KIATSU® SCHOOL ADMISSION APPLICATION

You may submit this application electronically or print a blank copy and submit it by hand.  
In case of hard copy, please complete each section by printing clearly in dark ink.

NAME AND ADDRESS			
NAME (LAST, FIRST, .M.I.)		HOME TELEPHONE (include area code)	
MAILING ADDRESS		WORK TELEPHONE (include area code)	
CITY	STATE	ZIP CODE	OTHER TELEPHONE  Cell  Pager  Message
E-MAIL ADDRESS			
DATE OF BIRTH			

EDUCATION / TRAINING				
List college, military, business, or trade schools attended				
Do you have a high school diploma or a GED certificate? (choose one) Yes No				
	Name and Location of College or School	Course of Study (Major)	Graduated? (Yes / No)	Degree or Certificate Received
A				
B				
C				

LICENSE / REGISTRATION / CERTIFICATE		
List any professional license, registration, or certificate you currently hold.		
Description	State	Expiration Date

SPECIALIZED SKILLS AND KNOWLEDGE		
List skills or knowledge you have acquired outside formal education. Include any previous training in relaxation or mind and body coordination.		
Activity	School / Teacher	Level of Accomplishment

**HONORS / ACTIVITES**

List your major activities and honors received in the last five years

Description	Date

**EMPLOYMENT HISTORY**

Indicate your work experience in the last 5 years.

Company / Institution	Job title	Dates

**DISMISSAL / LEGAL**

Complete this section if you have ever been dismissed from an institution for disciplinary reasons, or had legal difficulties

Description	Date

**PERSONAL BACKGROUND AND INTEREST IN KIATSU**

Write a statement about your background and life experience that will assist us in evaluating your application.

Write a statement about your interest in Kiatsu.

<b>PERSONAL HEALTH</b>	
List any medication currently being taken	
List any past serious injuries or illnesses	

<b>REFERENCES</b>		
Submit the names of two persons other than family members		
	Name	Telephone Number
1		
2		

<b>EMERGENCY CONTACT</b>	
List the name of one person who we may contact in case of an emergency	
Name	Telephone Number

<b>HOW DID YOU HEAR ABOUT THE KI SOCIETY?</b>
e.g. referral (please specify who), Internet, yellow pages, practiced with the Ki Society previously, etc.

**ARTICLES OF RELEASE FROM LIABILITY AND ASSUMPTION OF RISK**

- 1) I, \_\_\_\_\_, certify that I am in good health and have no physical defects which would endanger my health in participation and practice of Kiatsu and/or Ki Training.
- 2) I understand and agree that my practice of Kiatsu at all times is on a strictly non-commercial/non-professional basis and solely for the personal benefit of myself, my family and others.
- 3) I hereby release and discharge the Oregon Ki Society and its instructors from any liability whatever, resulting from or in any manner arising out of any injury or damage which may be sustained to me or my property on account of my participation and/or transportation connected herewith, in said activity.
- 4) I represent and covenant that at the time of signing this release and application, I am legally competent to execute it and that before signing it, I have fully informed myself of its contents and execute it with full knowledge thereof.
- 5) I agree to pay tuition a month in advance, and I understand that it is not refundable in any situation such as expulsion, etc.

SIGNED \_\_\_\_\_

DATE \_\_\_\_\_

By electronically submitting your application, you agree to the conditions stated the in the certification and signature section of the application, which is enforceable as if you had signed. If you submit the application by hand, you must sign it IN INK.

THANK YOU FOR YOUR INTEREST IN THE PERSON KIATSU SCHOOL.

KEEP A COPY OF THIS APPLICATION.

You will also be asked to have an interview with a Personal Kiatsu Instructor.