Spring Qigong at 1912 Center, March 2025 Registration and Liability Form

Taught by: Meggan Baumgartner, LAc, MACOM, Certificated Qigong teacher www.healingpt.com

Please fill out your contact info clearly so I may contact you with any info or changes to our class schedule. Read the paragraph below and sign release statement at bottom. Submit this form via email (healtharmony@gmail.com) or mail to: PO Box 9381 Moscow, ID 83843 by 4PM *Monday, March 10th*, 2025. **PAYMENT** can be made via venmo or a check made out to Healing Point, LLC for \$70. Thank you!



Phone #

Name

Signature

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Email address	Town where you live / work
one's health. Please consult your response to Qigong. While Megg form, if you have concerns or que	ed it is extremely beneficial and presents minimal risk to physician if you are in doubt of your capabilities or gan is happy to discuss your individual responses to this estions, she is not liable for harm that may result from It is your responsibility to pay attention to your own
, , ,	ave read and understand the above statement. I release ability if I am to injure myself while participating in

Name Printed

Date