



## Sheng Zhen Teacher Training - Caesarea, Israel

### June 21 - 27, 2020

#### Sheng Zhen Teacher Training Application & Registration Form

**Please send Application form, LOR, LOI and any questions to (by word document):**

To: **Dina Shafrir**

E-mail address: [dina.shafrir@gmail.com](mailto:dina.shafrir@gmail.com)

Phone: +972-52-2332390

Address: 14, Hanurit St. Netanya, 4267014, Israel

**\*\* Please complete this form and submit by January 18, 2020**

**\*\* You will receive a confirmation of acceptance to join the TT within 2 weeks.**

**\*\* Once your application has been accepted, follow the Payment Procedure that we will send later. Deadline of full payment is March 1st, 2020.**

**\*\* Sheng Zhen Seminar Participants:** Send your completed Application, Letter of Recommendation [LOR] and Letter of intent [LOI] \*\* on or before **January 18, 2020**. Your name will then be on a waiting list.

#### HOW TO PAY ?

#### Payment process:

- **Early Bird Fee: \$ 1400** (3 in room), **or \$ 1500**(double room), **or \$ 1630** (single room)  
- paid on or before **February 1st, 2020**.
- **Regular Fee: \$ 1480** (3 in room), **or \$ 1580** (double room), **or \$ 1720** (single room)  
- paid on or before **March 1st, 2020**.

**Please send the fee to:**

**Europeans:** may pay either to the American Sheng Zhen account **or** to the Manila Sheng Zhen US\$ account **or** Sheng Zhen € Euro account.

**Israeli :** may pay either to the American Sheng Zhen account **or** to the Manila Sheng Zhen US\$ account.

**Americans** may pay to the American Sheng Zhen account.

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**\*\* Please Email, by Word document, To**  
**Dina Shafrir** at [dina.shafrir@gmail.com](mailto:dina.shafrir@gmail.com), **+ 972-52-2332390 :**

- **Application Form And any questions ,**
- **(LOR) Letter of Recommendation,**
- **and/or (LOI) Letter of Intent: 3 Questions:**
  - 1. What Is Sheng Zhen Wuji Yuan Gong (Sheng Zhen Qigong)?
  - 2. What is your understanding and experience of Sheng Zhen?
  - 3. Do you want to be a Sheng Zhen teacher? If yes, why?

\*\*\*\*\*

## Application and Registration Form

I wish to register for the following: **Sheng Zhen Teacher Training June 21 - 27, 2020, Israel: Fee** \_\_\_\_\_

### **Fee**

- **Early Bird Fee:**
  - \$ 1400 (3 in room) \_\_\_\_\_ (paid on or before **February 1st, 2020.**)
  - \$ 1500 (double room) \_\_\_\_\_ (paid on or before **February 1st, 2020.**)
  - \$ 1630 (single room) \_\_\_\_\_ (paid on or before **February 1st, 2020.**)

### **Regular Fee:**

- \$ 1480 (3 in room) \_\_\_\_\_ (paid on or before **March 1st, 2020.**)

- \$ 1580 (double room) \_\_\_\_\_ (paid on or before **March 1st, 2020.**)

- \$ 1720 (single room) \_\_\_\_\_ (paid on or before **March 1st, 2020.**)

**Registration deadline: January 18, 2020.** You can sign up later, but we cannot guarantee a place.

**Payment deadline: Early Bird Fee: February 1st, 2020**

**Regular Fee: March 1st, 2020**

**\*\* Participants arriving on Friday, June 19- (for the Workshop on Saturday, June 20 )- can stay at the venue (double room, Triple room).**

*Please check the boxes next to the items you would like to appear on the website listing.*

*The name you write on this form is how it will appear on your certificate.*

*Note: all fields must be completed for the Sheng Zhen database.*

Name:

First \_\_\_\_\_ Middle Initial \_\_\_\_\_

Last \_\_\_\_\_

Home Address: \_\_\_\_\_

\_\_\_\_\_

Country: \_\_\_\_\_

Telephone Number: (Home) \_\_\_\_\_ (Cell) \_\_\_\_\_

Email Address: \_\_\_\_\_

Website: \_\_\_\_\_

**Please check ONE: I am applying as:** \_\_\_\_\_ **a Certified Sheng Zhen Meditation Teacher**

\_\_\_\_\_ **a Sheng Zhen Teacher in Training**

\_\_\_\_\_ **a Sheng Zhen Seminar Participant**

### **Accommodation:**

1. I want A Single room: \$ \_\_\_\_\_

2. I want a double room: \$ \_\_\_\_\_ **and to room with:**

3. I want -3 in room: \$ \_\_\_\_\_ **and to room with:**

1. Do you snore? Yes..... No.....

**Complete this section for Seminar Participants and Teacher in Training Participants:**

1. When did you first start Sheng Zhen Meditation? \_\_\_\_\_
2. Who is your current Sheng Zhen teacher? \_\_\_\_\_
3. Have you studied:
  - Gathering Qi and Awakening the Soul? \_\_\_\_\_
  - SZ Healing Stages 1&2? \_\_\_\_\_
  - Union of 3 Hearts and 9 Turns? \_\_\_\_\_
  - And either: Heaven Earth Meditation and Heart Spirit as one? \_\_\_\_\_  
Or: Heart Mind as One and Listening to the Heart? \_\_\_\_\_
4. How many hours of classes, workshops or Teacher Trainings as a Seminar Participant have you attended? Please try and calculate the hours to the best of your ability (note: TTs are usually counted as 8 hours per day, and only TTs attended as Seminar Participant can be counted as class hours)  
  
\_\_\_\_\_
5. When was your first TT as a Seminar Participant? \_\_\_\_\_

**Additional Questions For Teachers in Training Participants:**

6. When was your first TT as a Teacher in Training Participant? \_\_\_\_\_
7. When was your second TT as a Teacher in Training Participant? \_\_\_\_\_
8. How many total hours of Sheng Zhen Meditation teaching have you since your first TT as a Teacher in Training Participant?  
  
\_\_\_\_\_

**Complete this section for Certified Teachers:**

**REMINDER:**

**If you have attended TT before, you also must write a Letter of Intenet (LOI) with your application**

9. In what year were you first certified as a SZ Teacher? \_\_\_\_\_
10. When was your last TT? \_\_\_\_\_

11. How many hours of teaching have you done since certification? \_\_\_\_\_

12. How many 2 full day weekend seminars have you taught? \_\_\_\_\_

13. What volunteer work have you done for SZ? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

14. How many articles have you published or how many interviews have you done about Sheng Zhen Meditation?

\_\_\_\_\_

\_\_\_\_\_

**Medical Questions (all participants to complete):**

Please list any medical problems or needs that we should be aware of:

\_\_\_\_\_

\_\_\_\_\_

Please list any physical limitations: \_\_\_\_\_

\_\_\_\_\_

Emergency contacts (name and phone number); \_\_\_\_\_

\_\_\_\_\_

Please be self aware and mindful that this is an eight-day intensive. The training can be physically and emotionally challenging at times. If you have a serious medical condition (this is defined as psychological or physical), it is important that we know about it before hand. Please be advised that there is no medical staff on hand to handle emergencies, and all emergencies will be turned over to the appropriate local medical professionals. Thank you for your understanding.

My diet is:

Vegetarian    Meat in diet    Gluten free    Wheat-free    Dairy-free

Other dietary limitations/allergies: \_\_\_\_\_

**Payment Instructions:**

To secure a place payment must be made in full by **March 1st, 2020**  
**you will receive payment information as soon as your application is accepted.**

We will be requesting your complete arrival /departure and other necessary information at a later date.

**With warm blessings,  
International Sheng Zhen Society**

**Local organizers:  
Dina shafir & Ohad Kedem**

Signature \_\_\_\_\_ Date \_\_\_\_\_