

WORKSHOPS & RETREATS

1 GENERAL

- 1.1 The event / workshop / retreat is for men only. It involves group nudity and safe erotic touch. Activities will also include active breathing, movement and stretching and may be mildly physically demanding.
- 1.2 *BW4M* affirm that all men are welcome at our workshops.
- 1.3 *BW4M* create events / workshops / retreats in which all men are welcome to discover their deepest truths. We welcome men of all sexual orientations and preferences: gay, heterosexual, bisexual, including those who identify as having unwanted same sex attraction, to do their own work as they define it, to respect the identity and value of others, and to take responsibility for the impact their words and behaviours have on others.
- 1.4 *BW4M* support each man in pursuing his path to deeper authenticity.
- 1.5 *BW4M* do not, and will not, attempt to change a man's sexual orientation.
- 1.6 *BW4M* stand firm in support of gay and bisexual men. We support men who believe that homosexuality is a normal part of the spectrum of human sexuality and of mature masculinity.
- 1.7 *BW4M* will not tolerate proselytizing for any religion or belief.
- 1.8 *BW4M* will not tolerate discrimination (race, religion, body type, orientation, etc.) at our events / workshops / retreats. We support our trainers in identifying and challenging discriminatory language and behaviour. We may use language and words like energy, chakras, Kundalini, yoga, cum, fuck, cock, etc.
- 1.9 No special preparations are necessary beyond attention to personal hygiene, just as you would for any massage and bodywork session. Do bring an open mind and a willingness to explore.
- 1.10 Please remove all body jewellery – watches, rings, piercings, etc.

2. NON-DISCLOSURE & CONFIDENTIALITY

- 2.1 It is agreed between *BW4M* and all men attending any of the events / workshops / retreats that the activities presented by *BW4M* is valuable, special and unique;
- 2.2 It is further agreed between *BW4M* and all men attending any of the events / workshops / retreats that they will not, during or after the course of their relationship and / or the term of this agreement as described herein, disclose any information to any third party for any reason or purpose whatsoever without the prior written consent of *BW4M*, save in accordance with the provisions of this agreement. In this agreement "third party" means any party other than *BW4M* or the men attending this specific event / workshop / retreat.

3. CANCELLATION POLICY

- 3.1 Circumstances may change between time of registration and the time of a workshop.
- 3.2 For events / workshops / retreats booked at our Bodyworks & Wellness Centre – Pretoria / *BW4M* , cancellations made two (2) weeks or more prior to the event will be refunded, less a processing fee of R850.00.
- 3.3 No refunds are made if a cancellation request is received less than two (2) weeks before the event / workshop / retreat, but the credit can be applied towards a future events / workshops / retreats within one (1) year following the cancelled event / workshop / retreat.
- 3.4 Credit for events / workshops / retreats booked at Bodyworks & Wellness Centre – Pretoria / *BW4M* can only be used at Bodyworks & Wellness Centre – Pretoria / *BW4M*, not at other venues.
- 3.5 Cancellation at other venues will be handled directly through them and the above policy does not apply.

** Please fax signed copy of Confidentiality Questionnaire, a copy of Policies and the deposit confirmation to 086 592 1713.*

SIGNED AT _____ ON _____ 20____

FULL NAMES & SURNAME

SIGNATURE



INDEMNITY FORM

I, the undersigned,

(FULL NAMES AND SURNAME)

(IDENTITY / PASSPORT NUMBER)

1. Agree that I am voluntarily participating the use of the facilities, premises and activities ("Activities") presented and hosted by BodyWork4Men (*BW4M*) and / or any of their suppliers / subcontractors / associates / members / employees / etc.
2. Represent that I am able to participate in the Activities. I am not aware of having any physical, medical, mental or health disability or conditions or disease which may or could be aggravated or worsened by participation the Activities.
3. Have been advised by *BW4M* against participation in the Activities for safety reasons, if I have any 1 (one) or more of the following conditions:
 - a. Back and / or neck problems; and / or
 - b. Heart condition(s)
 - c. Other _____
4. Understand that there may be risks and hazards involved in the Activities I will be participating in. I understand that *BW4M* can not in any way guarantee the safety of the use of the Activities.
5. Agree to follow all lawful instructions, relevant rules and by-laws applicable to the Activities at all times.
6. Acknowledge that I may not at any time participate in the Activities while under the influence of any intoxicating substances.
7. I am aware and accept that *BW4M* shall be entitled, at any time in the interest of safety and without prior notice, to terminate my attendance and participation at the Activities.
8. Acknowledge that the risks cited above as well as numerous other dangers are inherent in these Activities and I agree to assume all risks associated with

- participation in the Activities. I take full responsibility for any injury or loss to myself, including death, which I may suffer, arising in whole or in part out the Activities.
9. I hereby indemnify *BW4M* and / or any of their suppliers / subcontractors / associates / members / employees / etc. against all or any claim which may arise as a consequence of my participating in the Activities, unless the damage is directly attributable to the gross negligence or any intentional wrongful act on the part of *BW4M*, and / or any of their suppliers / subcontractors / associates / members / employees / etc. (Subject always to the defences available to *BW4M* by Law, particularly in terms of the Consumer Protection Act, Act 2008 as amended from time to time).
 10. **DISCLAIMER:** PLEASE NOTE THAT OUR WORKSHOPS/ RETREATS ARE AIMED AT ENHANCING WELLBEING. WE ARE NOT REGISTERED PSYCHOLOGISTS AND WE DO NOT CLAIM TO PROVIDE ANY FORM OF PSHYCO THERAPY. SHOULD YOU EXPERIENCE ANY DISTRESS OR OTHER SYMPTOMS DURING A WORKSHOP/RETREAT, YOU HAVE TO NOTIFY US. YOU WILL BE ADVISED TO CONTACT A REGISTERED PSYCHOLOGIST AT YOUR OWN EXPENSE. SHOULD YOU EXPERIENCE ANY PROBLEMS AFTER A WORKSHOP/RETREAT, YOU ARE ENCOURAGED TO CONTACT A REGISTERED CLINICAL PSYCHOLOGIST TO ASSIST YOU AT YOUR OWN COST
 11. Hereby acknowledge that I have read and understood the clauses in the undertaking and the fact, nature and effect of these clauses have been explained to me.

Signature: _____

SIGNED AT _____ ON _____ 20____

FULL NAMES & SURNAME

SIGNATURE