

Vraj Adult Retreat



Consent and Permission Form

I cc	onsent to stay at Vraj Retreat during the period
indicated on registration form.	
I understand that I am choosing to stay and participate wire activities.	th other members of the program during all the
I understand that this gathering is a very informal family ty not assume any legal responsibility of the attendee. I here and volunteers of any liability arising from any accidents of the gathering. I grant permission to give all necessary tre unconscious or not capable of making decisions. I unders medical and related expenses during my stay at Vraj. Vra any other expenses.	by release PMVS and its associates, workers or injuries that may occur to me while attending atment or urgent care to me, if I am stand that I am liable for full payment of all
Vraj facilities may have been used for food preparation wir Vraj will not be able to provide quarantined facilities or me requirements.	
I understand that the Vraj facility is located in the rural are emergency it may take up to 45 minutes to reach the Hoswith severe food allergies may be trained to administer Epthan 45 minutes. I understand that Vraj volunteers are not life saving First-aid service while waiting for 911 to respon	pital, after calling 911. Even though Vaishnavs bipen, they may not reach the Hospital in less liable if they are not able to provide adequate
I understand that a medically trained person is not available issues and able to take regular and emergency medicine	
Adult retreat committee may decline my registration based be concerned about the well-being of myself.	d on the review of documents and deems to
I am physically independent for daily activity and capable difficulty. I am able to climb stairs.	of walking around in Vraj Campus without
Donation per private room is \$ 1404, if available. I unders are not allowed in any registered person's room. Maximur room.	
Sincerely,	
Signature	 Date