



# MEMBERSHIP APPLICATION FORM

## GENDAI REIKI NETWORK

### PERSONAL INFORMATION

Name: \_\_\_\_\_ Male/Female  
*First Last M.I. Gender (circle one)*

Address: \_\_\_\_\_  
*Street Address Unit/Apt number*

\_\_\_\_\_ *City State/Prefecture*

\_\_\_\_\_ *Country Postal code*

Email: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Fax number: \_\_\_\_\_

Would you like to be listed on the referral page on the GRN website? : Yes No

If YES, please list your website and/or email address:

❖ Please check the type of membership you are applying for.

Individual Membership: For a Gendai Reiki Master who agrees and supports the GRN's principles and objectives. All individual members are eligible to participate in Master Workshops (Master Kengan Kai) and New Year Reiju Ceremony held in Japan. A master certificate and a lineage must be attached with the application form.

Supporting Membership For any individual and organization including non-Reiki practitioners/non-Reiki related organization that agrees to the GRN's principles and objectives. The organization must be an ethical one.

❖ Please write your energy lineage below (Master membership applicants only):  
 Hiroshi Doi Sensei →

❖ Please answer the questions:

Did you receive your attunements in person (face-to-face)? Yes No (If no, how? \_\_\_\_\_)

Did you learn Gokai (Five Precepts)? Yes No Do you keep them in mind every day? Yes No

Please draw all symbols you learned and write how to pronounce them:

### APPLICATION/ENROLLMENT AGREEMENT

1. I agree and support the principles and objectives of Gendai Reiki Network.
2. I dedicate myself to help build a happy, healthy and harmonious society.
3. I abide by the terms, conditions, and regulations set by Gendai Reiki Network.
4. I abide by laws and regulations concerning medicine and all other health services.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

#### FOR OFFICE USE ONLY

Received	Reviewed	Payment	Membership #	Issued