

#### MUAISA HALE PULE SACRED PLANTS APPLICATION GENERAL INFO / HEALTH HISTORY



Date:

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Complete & send to: muaisa@yahoo.com with: Selfie + ID + Insurance Card + Waiver + Donation

Advanced planning is required. Places complete this present DEFORE BOOKING AIREARE

Advanced planning is required. Please complete this process BEFORE BOOKING AIRFARE

Aloha! How wonderful that you are moving forward towards joining us for one or more of our Indigenous "Hawaiaka" Sacred Plant Ceremonies. The intention of this form is to help us establish a baseline understanding of who you are, and to clarify your understanding of what we are and what we do. It will be held on file for up to one year.

Muaisa Hale Pule is a church with neither walls nor religious dogma. *In exchange for meeting certain charitable contribution thresholds, guests are granted the intangible spiritual benefit of participating in our programs and ceremonies,* all of which are offered at no charge or admission fee as none are sold in commercial transactions outside the donative context. As an official 501(c)(3) Chapter of New Haven Native American Church (NHNAC), we do not engage in commerce and rely instead on volunteerism and charitable contributions. Like all tax-deductible gifts,donations to Muaisa Hale Pule are not purchases in exchange for goods or services. They are non-transferable, non-refundable, charitable contributions. We appreciate your taking the time to fill in the requested information below (pages 1 - 6) as clearly, concisely and *legibly* as possible.

First Name:	Last Name:		
Nickname:	Email:		
Home phone:	Mobile Phone:		
Permanent Home Addres	ss, including postal code and country:		
Occupation:			
		Age: (must be 18+)	
U.S. CitizenResider	ntAlienOther (Specify):		
Relationship status: [ ] S	Single [ ] Married [ ] Divorced [ ] Sepa	arated [ ] Partnered [ ] Living Together	
Emergency Contact:	Relation	nship:	
	Te		
Please fill in the requeste	ed information below as <b>legibly,</b> truthfu	lly and thoroughly as possible.	
•	ut the plant ceremonies at Muaisa Hal		
2, Please state your inter	ntions (i,e., your personal reasons) for	wanting to participate with us.	

3. Are yo	ou seeking (check	only one): [ ] insigh	ht [ ] life transformati	on [] mind-alter	ing experience
ceremon out of the and "effe	ies) with resistance ir heads and into cts" of the ceremo	ce and control issues their hearts where to ony become available	Plant Ceremony (some s, blockages that prev the sacred plants do the le. This is as true with dro, LSD and various	vent them from be heir work, where our brew as it is	ing able to get all the "feelings" with
a.	participated in present self-awareness, eself-defeating trait (ex., fasting, pilgr	eviously for assisting ego-dissolution, spirits its and the like. Eithe images, psychother	ches and/or discipline g yourself now with the itual connection, open er list each involveme rapy, Zen philosophy, neck the "no previous	e deep-inner eco ning your heart, o nt and your dates self-help worksho	logy of vercoming s of participation eps,
	Practice :		D	ates:	
			wir and an managed to	. mantininata with	t avecatation
	[ ] I have done no	o previous inner wor	rk and am prepared to	participate with	out expectation
b.	any other shamar Event:: [ ]	ns and/or practitione	ou may have had with ers of sacred plant cer Da	remonies. ates:	
•	•		participation in a sacre		
start at d	usk and last until	approximately midn	g when two or more pe ight. You may also co akening, or with an all	uple a ceremony	with a 2.5-hour
What dat	tes do you plan to	be on the Big Island	d?		
Are you	planning on having	g access to a vehicle	e during your stay? _	Yes No	_ Undecided
Where or	n the Kona Coast	will you be staying	on the night of the cer	emony?	
	•		send you our list of ha 20 miles (30 minutes		
			Initial:	Date:	p.2

For what date(s) are you applying for Sacred Plant involvement? Check all boxes below that apply:
[ ] 1 Day = Sunday evening Sacred "Hawaiaka" Ceremony only (Please specify date)
[ ] 2 Day = Sunday Ceremony + (Mon - Fri) Private 2.5-hour Shamanic Deep Dive* (Dates):
*Sacred Plants are not a quick fix or a magical cure and won't, in and of themselves, solve your problems or transform your circumstances. They open the opportunity for you to perceive your life from an altered state, a different perspective. In the "Deep Dive," Shaman works with you on your own inner alchemy; so that you may work more precisely from the inside out to recognize and free yourself from your own addictive "mind trips" and self-defeating blind spots.
[ ] Add an all-day Eco-adventure/Mystic Tour to the above plan (Mon - Fri date):
[ ] List any/all alternative date(s) for which you may also be available:
PLEASE BE DISCREET WITH THIS INFORMATION, AND DO NOT SHARE IT OUTSIDE YOUR OWN, CONFIDENTIAL CIRCLE OF FAMILY AND FRIENDS.
The sacred plants we use are psychoactive entheogens (literally: "becoming divine within"). They are non-addictive and do not interfere with "mental clarity." As with pharmacologically active substances, however, they are <i>not for everyone</i> . Most people can use these plants safely in the recommended amounts. Nevertheless, participants should be well informed of any potential risks.  CAUTION: Because the plants we use are 100% natural (as opposed to chemical compounds that can be patented for profit), very little scientific research has been performed on their attributes. It is, however, generally accepted that the psychoactive compounds in these sacred plants can interact with the conditions and prescription medications listed as follows.
Please DO NOT USE these plant sacraments if you are:  [ ] Under 18 years of age, [ ] Pregnant or breastfeeding, [ ] Subject to liver disease or an existing liver condition, [ ] Having surgery in 3-4 days after use (to insure that there is no interaction with the anesthesia), [ ] Any of the following medications must be disclosed in Section 10 below as we will want to speak to you directly, and you will be required to sign a specific waiver on the day of ceremony:  • Antiretroviral medicines used to treat HIV/AIDS  • Medications used to treat Parkinson's disease  • Prescription monoamine oxidase inhibitors (MAOIs)

to, SSRIs, Demerol, cold medication, decongestants, sinus medication, nasal sprays, hay fever medications, diet pills, amphetamines, MDMA (ecstasy), cocaine, heroin, opioids, kratom, marijuana and crack. If you have been using any substances -- medical, legal, illegal, over-the-counter, street drugs or cannabis -- please advise us prior to attending any ceremony to discuss this matter further.

It is important that you be aware that the list of contraindicated substances includes, but is not limited

Initial:	Date:	p.3

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# CONSUME ABSOLUTELY NO ALCOHOL OR TYLENOL® FOR 24 HOURS BEFORE OR AFTER THE CEREMONY AND NO OTHER ENTHEOGENS (PARTICULARLY AYAHUASCA) FOR AT LEAST 2 WEEKS BEFORE AND/OR AFTERWARDS

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People who are suffering from conditions like heart problems, or are susceptible to panic attacks,
depression or anxiety, need to be cautious about our plant brew. Please answer the following
questions as completely and honestly as possible. Your responses will remain strictly confidential.

	as completely and honestly as possible. Your responses will remain strictly confidential.
8. Do you	suffer from or have a past/current history of any of the following? (Circle all that apply.)
Yes No	Recent surgery or surgery scheduled in the near future; please give date(s)
	High Blood Pressure / Low Blood Pressure / Hypertension / Tachycardia
Yes No	Cardiovascular disease, including a history of heart attacks
Yes No	Past or recent physical injuries, fractures or dislocations
Yes No	Recent or current infectious or communicable diseases
Yes No	Mental illness / Hospitalizations for psychiatric reasons
Yes No	Diabetes (Type 1 or 2)
Yes No	Retinal detachment
Yes No	Glaucoma
Yes No	Addiction
Yes No	Epilepsy
Yes No	Asthma
Yes No	Other- Including symptoms which affect:
	Yes No Head / neck
	Yes No Eyes, ears, nose or throat
	Yes No Lungs
	Yes No Skin
	Yes No Intestines / bowels / digestion
	Yes No Back
	Yes No Bladder or kidneys
	Yes No Chest / heart
	Yes No Circulation
	Yes No Ability to sleep
specific s health tha	elaborate with dates on any yes answers above, and tell us if there is anything about any ymptoms, disabilities, medical conditions or anything else about your physical or emotional at we should be aware of: (Attach additional pages if necessary.)
10. Have	you ever been hospitalized for medical OR psychiatric reasons? (Please elaborate with attach additional pages if necessary)

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11. Please list (print clearly) all prescribed or over frequency that you are taking or have taken in the you provide an accurate and detailed list of all nudramatically increase the effects of certain median	e past 12 month nedications, as	s.**Note: It is importa s the ceremonial plan	ant that ots can
12. List (print clearly) any supplements, herbs or v 2 months.**Note: It is required that you provide a taken regularly, as certain supplements can bloc can dramatically increase the effects of certain s	n complete list ck the effect o	of any supplements f the plants, and/or th	ne plants
13. List (print clearly) any Rx or recreational substa THC, etc that you have taken over the past 12 m **Note: It is imperative that you provide an accu substance use as certain substances can block and/or exacerbate potential side effects & risk fa	onths. Include a rate and detail or interfere wi	amount and frequency led list of your recrea ith the effects of the p	of use. tional plants
Substance:	Frequ	iency:	
[ ]			
14. List any allergies and elaborate. Be advised that property, we are surrounded by <i>jungle</i> , <i>mold</i> and <i>p</i> signing this form and applying to participate with us information, that you are solely in charge of and rest that you take full responsibility to guard against any on property without holding Muaisa Hale Pule or an	o <b>ollen,</b> and we lead to a collen, you acknowled ponsible for you possible allerg	ourn <i>incense</i> in cerem dge that you have read ur own health and well ic reaction(s) you may	ony. By I this being, and have while
Muaisa Hale Pule cannot be held responsible for accontrary to its stated policies or by errors/omissions you attest that you have read our Guidelines and FA questions above as honestly and completely as post that you take full responsibility for any physical, emoccur as a result of your participation in our ceremo and verify all statements contained herein with the unisrepresentation of any fact(s) provided on this for	in the informat AQ pdfs, that your sible without work of the without work of the work of t	ion you provide. By sign to have answered all the ithholding any information and disturbances where us permission to in the hat the omission or	ining below, ne tion, and lich may vestigate
	Initial:	Date:	p.5

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CHARITABLE CONTRIBUTIONS TO MUAISA HALE PULE ARE NOT PURCHASES.

THEY ARE NON-REFUNDABLE, NON-TRANSFERABLE FREE-WILL GIFTS

AND NOT IN EXCHANGE FOR GOODS OR SERVICES.

**REFUND POLICY:** Services, programs, and ceremonies at Muaisa Hale Pule are *not open to the general public.* Rather, they are offered exclusively as a courtesy to all of our donors who meet specific, charitable contribution thresholds.

We encourage you to be clear in submitting your charitable contribution. Under the Internal Revenue Code (IRC) which recognizes Muaisa Hale Pule as a church, charitable contributions made to our just cause are non-transferable, *non-refundable* and are not in exchange for goods or services. *This is not a purchase*. All charitable contributions are gifts in exchange for intangible, spiritual benefits only.

Should you reserve space in a ceremony and then cancel, every attempt will be made to reschedule you for a later date. If you cancel due to serious illness or family emergency, the specifics of your case will be reviewed on an individual basis upon submission of hard-copy, supportive documents to our Board of Officers.

#### KINDLY RETURN YOUR COMPLETED APPLICATION FORM AS FOLLOWS:

- 1. Read, complete and sign the pages above by either printing them out and completing them by hand, or by copying and pasting the form into Word, Pages, Libreoffice, etc. and keyboarding in your responses. Mac users are generally able to fill out the form by computer;
- 2. Include an in-the-moment head and shoulders "selfie" especially for this purpose -- nothing from your files, please -- with eyes exposed (no glasses), looking directly into the camera lens.
- 3. Email to <a href="muaisa@yahoo.com">muaisa@yahoo.com</a> a scan of (a) your completed application form along with (b) your signed waiver, (c) your head and shoulder selfie (d) a scan of your State or Federal photo ID (ex., passport, driver's license,etc.) and (e) proof of current health insurance. If you do not have health insurance, we recommend securing one-time, all-inclusive, deductible-free, travel insurance at <a href="https://www.volunteercard.com/compareplans/">https://www.volunteercard.com/compareplans/</a>. Policies start at \$30 with no age restrictions.
- 4. If you haven't yet met the charitable contribution threshold for participation in ceremony, you may contribute via Venmo, PayPal, or bank wire transfer via any of the options on the next page.
- 5. Wait list charitable contributions will be held in abeyance and automatically accepted as 501(c)3 donations only after space clears and we can assure you of placement. Should space inot become available, we will refuse your charitable contribution\* and return all funds to you in full.

I HAVE READ, I UNDERSTAND, AND I HAVE TAKEN THE TIME TO CONSIDER THIS

AGREEMENT, WHICH I SIGN NOW VOLUNTARILY. By agreeing to the terms above, I understand that this is a binding agreement, that my charitable contribution is not a payment for goods or services, that I am purchasing nothing, and that my electronically signing and submitting this document legally binds me in the same manner as if I had signed a non-electronic form.

Name (please print)	
Signature:	Date:

## SUBMIT YOUR 501(c)(3) "FRIENDS & FAMILY" TAX-DEDUCTIBLE CHARITABLE CONTRIBUTION

Please be clear in your intent. Muaisa Hale Pule is a church, does not engage in commerce and cannot accept payments in exchange for an item or service.

If using Venmo or PayPal, you must AVOID paying us for "GOODS OR SERVICES."

Charitable Contributions are governed by Charitable Contributions Tax Law and are NON-TRANSFERABLE and NON-REFUNDABLE.



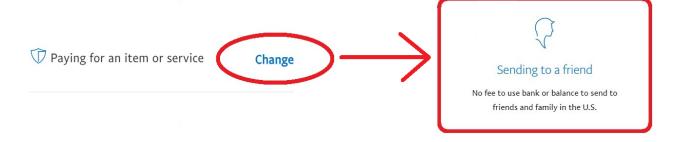
## 1. Via the Venmo App:

- Open the Venmo app on your mobile device.
- Log-in and select the **Paymen**t icon at the top right of your screen.
- Add @muaisa or muaisa@yahoo.com to your Venmo recipient list.
- •Input the amount you want to send..
- Be careful to send funds via "Friends/Personal," not for "Goods and Services." Muaisa Hale Pule does not engage in commerce and is not licensed to take money in exchange for services
- The last four digits of the associated phone #, if you need them, are 7210.
- Add a note if you care to, and check that you are sending money from your desired account. All **credit card** transactions will be charged 3.5% surcharge; using your Venmo balance is free.
- Check the details of your transaction carefully, and submit by tapping the 'Pay' button.
- Confirm the transaction.



## 2. Via Paypal.me/giftingfund

- Go to www.paypal.me/giftingfund on your phone or computer
- Click on Send
- Log in or sign-up for a PayPal account.
- Enter the amount you want to send
- If the screen says "Paying for an item or service," click Change
- Select "Sending to a Friend."



- There is no PayPal fee when you use your bank or PayPal balance
- Select how you want to send and review all information
- Check the details of your transaction carefully, and click Send Payment Now

### 3. Via Bank Wire Transfer:

A bank-to-bank wire transfer is an electronic payment you initiate either through your online bank account, or in person at your local bank branch or financial institution. Transfer fees vary from bank to bank and can range from ZERO to as much as \$50 US,

Be sure to allow for a minimum of 3 - 5 days advanced planning for processing. International bank transfers may take even longer to complete.

Below is the required information that is generally needed for a bank transfer.

## h Bank of Hawaii

Routing Number for Domestic Wires 121301028

International Wires (SWIFT Code)
BOHIUS77

Receiving Bank

Bank of Hawaii / Kealakekua Branch

Receiving Bank Address

81-6638 Hawaii Belt Rd, Kealakekua, HI 96750

Receiving Bank Phone

+1-808-322-9377

Recipient / Beneficiary Name

Oklevueha Native American Church of Missouri, Inc.

Recipient / Beneficiary Address

PO Box 2334, Kealakekua, HI 96750

Recipient Account Number

0083-470844

Muaisa Hale Pule grants participation in its programs and ceremonies at no charge to donors who have met certain charitable contribution thresholds.

Participation dates cannot be confirmed or reserved until we receive your completed application package for the program(s) that interest you, and until the total amount of your charitable contribution(s) meet(s) the corresponding charitable contribution threshold.



Due in part to the growing popularity of shamanism over the past few years, Muaisa Hale Pule has been targeted by an emotionally-destabilized individual who came to volunteer for us in 2015. Within a matter of days of his being on property, he became violent and was asked to leave.

Ever since then, this person has obsessed on stalking and bullying us online. Assisted by his girlfriend ('clearriverofspirit'), whom we have never met, he impersonates us, posts harassing videos and fraudulent reviews of us, references back and forth

between these various reviews to promote his hogwash, and uses free iPhone software to spoof our Caller ID and misrepresent himself as us in a campaign of telephoning random, potential guests in the shamanic and sacred plant ceremony communities, spewing offensive language.

Although we have been granted a Protective Order, issued by the District Court of the Third Circuit in Hawaii against this person, when infractions of this nature take place across State lines and involve the Internet, there is little that either local law enforcement and/or the FCC can do -- or are willing to do --to curtail or prevent this from occurring.

Please be extremely cautious of all third party videos and defamatory reviews you may find of us online, and double check any questionable claims and/or one-star litanies you read or phone calls you may receive from a Caller ID that displays our name and phone number. The only legitimate person making telephone calls from our phone number is Dr. ZZ, and she makes a practice of not telephoning anyone who doesn't first contact us requesting information.

Kindly report to us any suspicious websites or reviews you come across using our name and/or any suspicious phone calls you may receive from someone claiming to be us. If you are not sure, please call us immediately at +1-808-323-3238.



#### POST, EMAIL, WEBSITE AND TELEPHONE CONTACT

Post: Muaisa Hale Pule 81-990 Halekii Street, #2334 Kealakekua, HI 96750

Email: <a href="muaisa@yahoo.com">muaisa@yahoo.com</a> Website: <a href="muximuaisa.org">www.muaisa.org</a>

Phone: +1 808 323 3238, Hawaiian Time

We look forward to having you join us!