

# India Registration Packet

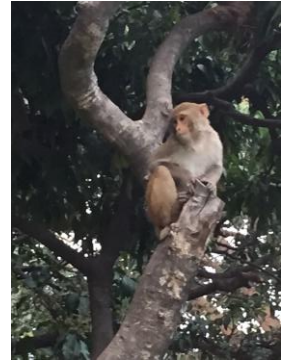
## 3 Treasures Acupuncture presents a Spirit Voyage



Acupuncture Humanitarian Medical Clinic  
in Rishikesh,  
**October 7-18, 2025**

(arrival and departure dates; group departs Monday Oct 6)

**\$850**



Contact Information: Sami Rank, L.Ac.  
602-350-6506  
www.samirank.com

### **Checklist to turn in to coordinator:**

- Registration form
- Waiver and release (either: the one for PIHMA OR the one for all others)
- C-Form for ashram (will be emailed separately & filled out online, returned via email)
- Licensed professionals: a copy of your license.
- **Deposit for \$350 due 05/18/2025 – non-refundable**
- **\$500 Remainder due 09/23/2025**
- **Preferred methods of payment: *check made out to Sami Rank OR zellepay to 602-350-6506* ; if you need to use cc, there is a \$15-25 charge to cover the fees (whole or partial payment by cc)**

If you are not coming as a healthcare provider, you are still encouraged to be a part of the volunteer team.

**Please note: Rishikesh is a sacred place and there is no meat or alcohol in the town. It is a quiet retreat to restore your spirit through seva (selfless service) and meditation/yoga if you choose.**

This price includes: Airport and group ground transfer, most breakfasts and some meals, all accommodations, medical supplies (for acupuncture), translators, supervision by a licensed professional (for interns), some sightseeing.

This price does **not** include: Airfare, Airport transfer if you travel independently from the group, personal expenses. Expect an approximate budget of \$2500-3000 (\$850 trip fee included).

*If you need to renew or get a passport, do this immediately!*

## ABOUT RISHIKESH AND THE ASHRAM:

This is primarily a volunteer healthcare trip providing humanitarian aid to a community in need. Many places in India are lacking in funds and underserved in healthcare facilities. Doctors from around the world come to serve at the Parmarth Niketan charitable hospital, and sometimes the hospital sponsors medical camps at local villages to the people who cannot make it to the hospital. Rishikesh has many areas where cars cannot go, and so some villagers are stuck in the mountains without healthcare. More info is found through these links:

- <http://www.parmarth.org/divine-projects/healthcare/>
- <https://divineshaktifoundation.org/>

Rishikesh sits on the banks of the mother Ganga, the Ganges River. It is known as the birthplace of yoga, and you will expect to see people bathing in the river as a form of worship. Rarely do people go swimming recreationally. Rishikesh is a holy town, and as such is vegetarian and lacks in alcohol and other forms of partying. It is infused with swamis, including some famous ones who stay for periods of time such as Mooji, and our very own swami of Parmarth Niketan ashram: H.H. Pujya Swami Chidanand Saraswatiji. Of course, don't believe every swami-looking person you come across, as there are charlatans around as well. Generally Rishikesh is very safe.

Many parts of the town do not have car access, so you can expect to walk a mile or more to get where you want to go. Walking down the narrow roads and across bridges you will be fighting for space amongst cows, bicycles, scooters, and a bunch of other walkers. Monkeys run amok on the bridge rails and on the buildings around you.

People asking for money will wear on you; just follow the ashram policy of not giving directly to the people but giving to the ashram who directs donations to the proper channels. All over India, many of the children are hustling for adults lurking nearby. Some even rent babies from local orphanages for the day, and some very unscrupulous beings drug the babies so they look asleep. Your money will not make it to the "family" that you are trying to help. "Slumdog Millionaire" demonstrates some of these tactics and more, if you have the stomach for it.

There are mild waterfall hikes, and the surrounding hills have elephants, tigers, leopards, and birds. Monkeys abound in town. If you're looking for more adventure, the Ganges is a popular river rafting location.

In the late 60's the Beatles, Donovan, the Beach Boys, Mia Farrow, and other famous people stayed with Maharishi Mahesh Yogi, father of Transcendental Meditation, at what is now known as the Beatles ashram. It has since been taken over by the jungle and lies on Rajaji Tiger Reserve, a quick walk down the road from Parmarth Niketan ashram.

## ITINERARY (somewhat subject to change):

Monday Oct 6: depart for New Delhi

Tuesday Oct.: arrive New Delhi (late night)

Wednesday Oct. 8 & Thursday October 9: tours New & Old Delhi bus tour: (not all will be on the tour, but most will) Red Fort, tour of Chadni Chowk, Qtab Minar, Lotus temple, Humayun's Tomb, Lodi garden, Gulatis for late lunch

Friday: depart for Rishikesh on private chartered bus \*\*Meet in front of our dorm area at 5:40 PM for Aarti

Saturday: set up clinic, Beatles ashram, hike, shop, eat

Sunday: optional classical Indian music concert

Monday - Friday: clinic 9:30-3:30 , free time,

Late Friday/ early Saturday: depart

\*\*\*\*\***Save the above pages for your planning. Turn in the following pages to the coordinator. You will be given further trip details in a travel packet.**

# India Registration Packet

Name:	
Address:	
City:	State/Zip:
Phone:	(non-PIHMA Email):
In a case of emergency, contact:	
Emergency Email:	Phone:

## \$350 non-refundable deposit due at date of registration

Accommodation Preference:

- ☐ \$850 shared accommodation
- ☐ add \$200 single accommodation (if avail)

For admin use only

deposit paid \$\_\_\_\_\_ (date) \_\_\_\_\_ ck/cc  
\$\_\_\_\_\_ remainder paid \_\_\_\_\_ (date)

\_\_\_\_\_ observation intern \_\_\_\_\_ practicing intern professional \_\_\_\_\_ LAc \_\_\_\_\_ ND \_\_\_\_\_ other ( \_\_\_\_\_ )  
ND: does your license allow you to practice acupuncture in the state where you practice and are you trained to do so? Y/N  
\_\_\_\_\_ NADA trained \_\_\_\_\_ companion (non-volunteer)

X\_\_\_\_\_ Transportation: If you are travelling with the group, there will be transport from all airports to the hotel/ashram, and from Agra to Rishikesh. Please let coordinator know if you will be travelling independently, and therefore arranging your own transportation. ALSO, you will need to purchase a flight from Rishikesh to Delhi. Precise details are in the travel packet. Domestic flights will add an additional aprox. \$50.

X\_\_\_\_\_ Ashram rooms are basic and clean but not fancy. If you do not wish to stay at the ashram you will be guided to the nearest hotel. This will be at your own expense.

X\_\_\_\_\_ When registering for double occupancy, please note that we will do our best to pair you with a roommate or fulfill your roommate request. However, if we are unable to pair you with a roommate, you will be expected to pay the additional charge for a single occupancy. At this time, there are no triple room options. However, if this changes, shared accommodations might have 3 people in one room, each in their own bed, depending on odd/even/ male/female participants; there is not a fee reduction for this arrangement.

X\_\_\_\_\_ 3 meals per day are provided at the ashram. Breakfast is provided all days of the trip. Additional meals may be purchased at the ashram or nearby restaurants. However, if you have certain aversions or allergies, you may choose to purchase your own meals at restaurants. There is no fee reduction for this.

X\_\_\_\_\_ Malpractice insurance is not available for overseas trips. Each professional is liable for his/her own standards of care and should follow the same precautions as in the USA. Each professional who practices outside the scope of acupuncture must do his/her own research before practicing medicine in India. You are fully liable for your own actions. The cost includes medical supplies appropriate for TCM only; NDs must bring their own supplies not related to acupuncture.

X\_\_\_\_\_ Many parts of this trip involve daily walking; India has no car access in many locations. Elevators may not be accessible at hotels and yoga facilities. Many facilities on this trip do not meet United States Federal accessibility standards.

X\_\_\_\_\_ Do not purchase your airfare until trip is confirmed (minimum of 5 participants). All liability is assumed by the individual participant who should purchase travel insurance.

X\_\_\_\_\_ All volunteers are expected to work aprox 30 hours, barring unforeseen illness; communicate with the trip coordinator immediately if you fall ill. Scrubs and ID badge must be worn at all times during the volunteer work. All supplies are property of 3 Treasures Acupuncture & Spirit Voyages and will be used on future missions.

X\_\_\_\_\_ Full payment is due Sep. 23, 2025. **Cancellation Policy:** After Sep 23 no refunds can be given. Deposit is non-refundable.

X\_\_\_\_\_ This trip is run by 3 Treasures Acupuncture and Sami Rank, L.Ac. There is no affiliation with PIHMA college. Intern credit can only be granted by your acupuncture college. NCCAOM 10 PDA hours are awarded once every 4 years.

Please sign that you have read the important information: X\_\_\_\_\_

*Waiver for PIHMA interns/faculty/staff only:*

## International Study/Travel Release and Waiver Liability

Full Name: (Print) \_\_\_\_\_

Phone: \_\_\_\_\_ Email (non-PIHMA): \_\_\_\_\_

Semester Term (circle one): Spring Summer Fall Year \_\_\_\_\_

Status (circle one): Student Staff Faculty Member

I understand this may include, but may not be limited to, traveling to and from other countries, traveling to and from cities and towns inside or outside the United States of America, consuming the food and living in those accommodations available in the cities and foreign country(ies) to which I travel, and living and working in cultures and with people whose living conditions, social practices and values, and even attitudes toward foreigners may be significantly different from those in my home city, state, country and culture. I understand that this agreement is not meant to provide exhaustive advice with respect to any specific trip or travel experience, and that I must seek such information on my own, especially at times like this when Americans are potential targets of violence at home and abroad.

I hereby freely and voluntarily, without duress, execute this Release under the following terms:

**General Waiver and Release.** I release and forever discharge and hold harmless, the PIHMA Health & Education Network, LLC dba Phoenix Institute of Herbal Medicine & Acupuncture, and the Foundation for PIHMA Research & Education (hereinafter “PIHMA”) and its affiliated organizations, owners, directors, officers, employees, volunteers and agents, and their successors and assigns (all known as the “Releasees”) and Sami Rank, L.Ac. from, and agree not to sue for, any and all liability, claims, and demands of whatever kind or nature, including but not limited to attorney’s fees, either in law or in equity, which arise or may hereafter arise from or be related to my participating in the any study or travel abroad and related activities whether such injury, loss, liability, claims, or demands results from travel, from disease, consumption of food, or from civil unrest or otherwise. I understand and acknowledge that this Release discharges PIHMA and Sami Rank, L.Ac from any liability or claim against it with respect to any bodily injury, personal injury, illness, death, monetary loss or property damage that may result from my participation in traveling, studying, working, volunteering or visiting abroad. I understand that PIHMA and Sami Rank, L.Ac assumes no responsibility for or obligation to provide financial assistance or other assistance, including but not limited to medical, health, or disability insurance, in the event of injury, illness, death, accident, monetary loss or property damage.

**2. Medical Treatment.** I hereby release and forever discharge PIHMA and Sami Rank, L.Ac from any claim and costs whatsoever which arises or may hereafter arise due to any first-aid treatment or other medical services rendered to me or to my dependents/companions in connection with an emergency or health problem during my travelling abroad, or for lack of receiving medical treatment. I understand that I must and am solely responsible for maintaining adequate health, accident, disability, hospitalization and travel insurance during my travels. I assume the risk from failure to obtain and maintain such insurance or for failure to file and negotiate all insurance claims in the event necessary, as well as payment of any out-of-pocket expenses incurred while travelling. I acknowledge that it is my sole responsibility to verify that insurance and whether my policies cover healthcare related expenses and repatriation (return to the US due to a medical emergency) while traveling locally and overseas.

**3. Assumption of Risk.** I am aware there are possible risks and dangers associated with travel, especially when travelling abroad. I understand that my participation in any study/travel abroad experience may include activities and circumstances that may be hazardous to me and my property, including, but not limited to, local or international travel, local transportation in the country of my travels, poor health conditions, inadequate medical treatment facilities, scams, fraud or criminal activity, and other inherent dangers. I recognize that I may be traveling to and from locations that pose risks from terrorism, war, insurrection, or criminal activities. I understand that

I assume the risk of being taken hostage and held for payment of ransom, and that PIHMA and Sami Rank, L.Ac will not be liable for said ransom.

4. I also agree that I am solely responsible for any losses and expenses due to travel, including but not limited to change of travel plans and delays, dishonors in travel arrangements, visa or passport costs, deposits, excursions, phone bills, room charges, travel and personal expenses. I understand that I may obtain travel insurance. I agree that I should meet with my financial aid counselor to discuss how this travel experience may impact my financial aid.

5. I hereby expressly and specifically assume the risk of injury, damages or harm in these circumstances and release PIHMA and Sami Rank, L.Ac from all liability for injury, illness, death, monetary loss or property damage resulting from such circumstances during my travel abroad, whether suffered by me personally or by any of my accompanying dependents or companions. In addition, I assume liability for and agree to indemnify and to hold PIHMA and Sami Rank, L.Ac harmless for all claims or damages caused, in whole or in part, by me and my negligent, intentional, or other act or omission on my part.

6. I understand that PIHMA and Sami Rank, L.Ac does not guarantee and may not be able to provide academic credit or credit for volunteer hours for time spent on these travel experiences. I also understand that in applying for potential review of such hours or experience that I am responsible for providing sufficient documentation or transcripts as per PIHMA policy for evaluation of credit, transfer and challenge of credit, and other policies. I also understand that I may be required to leave the program at PIHMA for any conduct that violates PIHMA's code of conduct, including criminal and drug-related activity, that would be considered an impediment to admission to PIHMA or licensing as a practitioner. I acknowledge that I am solely responsible for handling any legal problems with foreign nationals or governments and will attend to such matters personally with my own funds, and indemnify PIHMA and Sami Rank, L.Ac from any violations or penalties arising from my own defense.

7. I understand that it is my sole responsibility to inform my parents/guardians/significant others with important information as to my whereabouts and involvement with travel. I give permission to PIHMA and Sami Rank, L.Ac to share any information as necessary for my health and safety according to the sole judgment and discretion of the College.

8. It is my express intent (of the Student/Staff/Faculty Member) that this Agreement shall be binding to members of my family and spouse (if any), their estates, heirs, administrators, assigns or personal representatives.

9. **Other.** I agree that in the event that any clause or provision of this Release shall be held to be invalid by any court of competent jurisdiction, the invalidity of such clause or provision shall not otherwise affect the remaining provisions of this Release which shall continue to be enforceable. I understand and agree that any dispute concerning this Release or any aspect of my travel abroad shall be brought in the state or federal courts of Arizona.

Agreement: By signing below, I hereby certify that I have read, understood, and agreed to be bound by all of the terms set forth in this document, and that all the information I have provided is accurate and complete.

Signature: \_\_\_\_\_ Date of Signature: \_\_\_\_\_

Printed Name of Student/Staff/Faculty Member: \_\_\_\_\_

*Waiver for all other participants:*

## **WAIVER AND RELEASE OF LIABILITY**

I hereby release 3 Treasures Acupuncture and Sami Rank, L.Ac. from any and all liability for any acts or omissions related to the rendering of medical services to the patients in India, in connection with the medical mission.

I agree not to sue for any and all liability, claims, and demands of whatever kind or nature, including but not limited to attorney's fees, either in law or in equity, which arise or may hereafter arise from or be related to my participation. I understand and acknowledge that this Release discharges Sami Rank, L.Ac. from any liability or claim against her with respect to any bodily injury, personal injury, illness, death, monetary loss or property damage that may result from my participation in volunteering abroad.

I fully understand that the mission has risks of accident, injury or disease, which may be caused by my own actions or inactions, the actions or inactions of others, or the conditions at the locations where the mission will take place. There may be other potential risks either not known to me or not readily foreseeable at this time, including but not limited to local transportation in the country of my travels, poor health conditions, inadequate medical treatment facilities, scams, fraud or criminal activity, terrorism and other inherent dangers. I fully accept and assume all such risks and all responsibility for losses or damages I may incur due to my participation in the mission. I certify that I am qualified, in good health and in proper physical condition to participate in the mission.

I further hereby waive and release any and all rights and claims for loss or damage, at law or in equity, that I may have against 3 Treasures Acupuncture and Sami Rank, L.Ac., now or in the future for any and all illness, injury, loss or damage suffered by me as a result of my participation in this mission, even if the loss or damage is caused by the person I am releasing. This Waiver and Release is binding on my heirs, successors, assigns, personal representatives, administrators and executors.

I certify that I have read the contents of this document, fully understand its provisions, and freely execute this Waiver and Release.

Signature: \_\_\_\_\_ Date of Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_