

PositivEnergyWorks, LLC

PositivEnergyCenter

www.PositivEnergyWorks.com

Washington, D.C./ Capitol Heights, Md. 20743

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202-667-2577

Blessings to YOU who are Interested in the Optimum Life Breathology™ Certification during our POWER OF THE BREATH TOUR or during other scheduled times. The course is developed and instructed by Ayo Handy-Kendi, renown as The Breath Sekou (master teacher)

We are so pleased that you are interested in taking a giant leap in your life and in the lives of others. You are in for a life-changing experience, as you gain tools of transformation, healing and prevention using the “Power of the Breath” and becoming a Certified Breathologist (CB). See testimonies: http://youtu.be/_RWs6h-s2rw

Here are the **Optimum Life Breathology™ Certification Instructions** to help make your participation time with us beneficial.

WHAT YOU RECEIVE BY TAKING THE COURSE:

Optimum Life Breathology™ formerly a 9 hour training course* is NOW, a 16 hour course, 8 hours a day vigorous program that offers:

Breath Training, Breath Mechanics, Practical application of 12 best practice Breath Techniques, Wholistic and Oxygen principles and much more (See Course Outline).

A group session of Transcendence Breathwork™ valued at \$175 by itself.

Hand-outs of Required reading “Power of the Breath” by Sekou Ayo Handy-Kendi, is our workbook and is NO longer included in the fees, but can be purchased separately during or after the course..

Life-time consultation and reductions on future events, activities, services.

Name and State listed on Website as a Certified Breathologist

Graduation Certificate and Rites of Passage Ceremony

*Participants attending one day course are Breathologist in Training.

**Entire course, plus required reading of the “Power of the Breath Book” and 10 Breath Adjustments constitute full requirements for Certification.

WHY TAKE THIS COURSE AND CERTIFICATION: Are YOU Seeking self-development or higher consciousness? Desiring self-care for your personal health, emotional and mental balance? Needing increased focus, energy and productivity as a professional, teacher, or health practitioner? Want to help others be the best that they can be? Wanting to learn a technique that creates immediate shifts and peak performance? *THIS IS THE COURSE FOR YOU*

If you have any needs, please do not hesitate to call before the course. **ONCE FULLY REGISTERED AND FEES PAID, YOU WILL RECEIVE LOCATION OF COURSE AND OTHER DIRECTIONS.**

With deepest breath,

Ayo Handy-Kendi, CB, CTF, CLYL, CLYT, Reiki Master, Sound Healer

The Breath Sekou); founder, Optimum Life Breathology™

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OPTIMUM LIFE BREATHOLOGY™ CERTIFICATION PARTICIPANT INSTRUCTIONS

Checklist of things NEEDED for ideal coursework:

- a. We ask that you pre-register and pre-pay. See PAYMENT SECTION for details: Please send in the "PRE-REGISTRATION FORM prior to session". There is a short registration check-in period of ½ hour from 8:00 – 8:30 p.m. Having to deal with money can be hurried and uncomfortable. If we have agreed to course payment balance due, please bring a check or money order preferably. Call ahead, if any other arrangement needs to be made.
- b. Please arrive on time. We will start the course exactly at 8:30 a.m., no exceptions (See course schedule).
- c. Please indicate any medication usages, physical ailments, surgeries or limitations prior to course so that we can be aware of the need to adjust to your concerns. If you are not able to lay on floor, indicate.
- d. Do not use alcohol or any other mind-altering substances 24 – 48 hours prior to sessions.
- e. Get a good night's sleep the night prior to session;
- f. Drink extra water 24 hours before course. Bring a litter (or 2) of best water possible, to hydrate during course. Be prepared to drink extra water 24 hours after course;
- e. Do not eat heavy, garlicky, vinegary, spicy foods, 1 hour before course (light salad / fruit is best);
- f. During ½ hour lunch break, bring very light meal (again light salad/fruit is ideal). Leave the bread or meat out. Bring fruit juice along with your water, for an afternoon snack. The Breathing is quite filling
- g. Wear loose, breathable clothing around the mid-waist comfortable to also move in or lay on the floor (linen, cotton, silk, sweat clothes are ideal; No spandex, polyester, tight jeans or restrictive clothing).
 - Loosen belts; remove bras;
 - Wear clean white cotton socks;
 - Bring a shawl or sweater layer if you tend to get cold;
 - Also, wear comfortable shoes and be prepared for a short OUTDOOR segment;
- h. Remove all neck jewelry, dangling earrings and glasses during techniques;
- i. For the floor learning segment(s) please bring:
 - Either extra thick blanket(s), padding, yoga mat or thick sleeping bag(s) to lay on;
 - Clean cotton sheet, spread, blanket to cover (if you tend to get cold);
 - and a head pillow and a floor pillow to place under the knees (for anyone who has back pain);
- j. Most of the course work will be seated, but feel free to bring pillows to seat on;
- k. Please be prepared to turn off phones and turn off business. Consider this a retreat of sorts;
- l. Come with open Spirit/Mind/Body willingness during course, to be physically touched, to be massaged near some private areas, hear voice toning, bells, loud music and be introduced to 100% therapeutic essential oils;
- m. **Please limit the exchange of comments during course of instructions.** The huge volume of information/techniques to be offered in a short amount of time, makes this not possible. Bring a writing pad to jot down questions, comments, notes. Insights. "The Power of the Breath" workbook will be referenced in class.
- n. Ideally, plan to relax after the course; Allow yourself to take the evening off with no heavy work, deadlines or emotional engagements or entanglements;
- o. Most are quite hungry after the course, so plan to bring a little extra money to eat at a local restaurant before going home or plan to eat as soon as you get home;
- p. Sale items will be available during the lunch break, and in the last hour of the course.
 1. Sekou Ayo's "Power of the Breath Book", required workbook for the course and certification \$25
 2. Sekou Ayo's "Relaxation Moments" DVD @\$15 save \$5 from regular price;
 3. Sekou Ayo's "Applied Breathology" DVD@ 15, save \$5 from regular price

4. Sekou Ayo's " Why the Breath Has So Much Power" with Asthma Guide for Parents- \$8;
5. Original CD's by Earth Love Tune-Up Crew (ELTUC) featuring John Davies 3 & Sekou Ayo, tune-up music, excellent to breathe or relax by; "Earth Song" 2-CD set -\$20, excellent; "Sea Breeze" - \$10; "Circle Dance" - \$10. "Dawn to Dusk Suite" \$10.
6. Young Living Oils – 100% Therapeutic grade Essential Oils to support better breathing - Intro bottles @ \$10 each.
7. Motherland's Gold Moringa – the Miracle Tree – 92 nutrients, powder, capsules, tea, liquid
8. Product B – the nutraceutical that impacts Telomeres to offer the Fountain of Youth and Healing at the DNA level.

q. Commit to working on self with using Optimum Life Breathology™ before working on others. Complete 10 Breath Adjustments and read Workbook. . Commit to working with Ayo to develop your business. Keep reading, studying and practicing to evolve.

FEES and PRE-PAYMENT: Optimum Life Breathology™ Certification Early-Bird (E.B.) Fee is \$225. (Certifications may vary based on location and will be noted)..

Last minute payments made within one week of course, pay **\$275.00 (No exception)**.

Breathologist In–Training, the one day course fee is **\$120**.

Request fee waivers, reductions or barter exchanges in writing, 2 weeks prior to course.

Once payment is made, the specific course address and directions will be shared with the participants.

Please make out **checks/ money orders** (preferred) to: *PositivEnergyWorks™*. MAIL TO: The PositivEnergy Center, 1311 Opus Avenue, Capitol Heights, Maryland, 20743. If payment not mailed 3-4 days prior to certification please call 202-667-2577 for instructions on bringing payment in. **Credit Card** advance payments can be done thru **PayPal** via **Internet** Sales@PositivEnergyWorks.com **Please include \$6 processing fee.**

PRE-REGISTRATION FORM: *Please return w/pre-payment or send by email prior to Course. PEW reserves the right to accept or reject applicants.*

1. NAME TO BE USED IN THE COURSE:

NAME YOU WANT ON YOUR GRADUATION CERTIFICATE:

2. ADDRESS:

3. CITY _____ STATE: _____ ZIP _____

4. PHONE: _____ (D) _____ (E)

Best time to call: Day ___ Eve ___ Night ___

5. EMAIL: _____ FAX: _____

6. How did you hear about the course? _____

7. Emergency Contact Name: _____

8. Tel and/or Cell for Texting:

9. Please check if:

___ you are pregnant. Due date _____

___ you have ever been hospitalized for psychiatric or medical reasons (note details on reverse)

___ you are taking any medications. Which? _____

___ you are currently in therapy or any support group

___ there were complications at your birth (Caesarian, Late or Early born, Anesthesia, Multiple births, etc.)

___you have attempted or seriously considered suicide (note details on reverse side)

___you are currently experiencing a "spiritual or emotional emergency"

___you currently have an infectious or communicable disease

Do you have any history of the following:

___Cardiovascular disease or heart attack ___Family history of strokes ___Asthma ___Headaches___High blood pressure; ___Diagnosed psychiatric condition; ___Aneurism; ___Epilepsy; ___Diabetes; ___Osteoporosis; ___Recent surgery; ___Surgery in the stomach area: ___Physical illness or injury; ___Recent/current communicable disease; ___Glaucoma or retinal detachment; ___HIV/AiDs; ___Alcohol or drug addiction _____Simple Head Cold, respiratory issue, circulation issue

Is there anything else about your current physical or emotional status that we should be aware of? If you answered "yes" to any of these questions, please explain on the other side of this sheet._____

10. Note any specific limitations, illnesses or health challenges not mentioned:

11. Any personal history of mental illness, depression or emotional disturbance? Please explain in detail and when:

12. Any personal history of substance abuse, drug usage, drinking or medications? Please and explain and when:

13. Why do you want to take this course and become a Certified Breathologist?

***NOTE:** Please use the back if necessary to fill out the answers to these questions or attach other sheets. They are very important questions and must be answered with honesty. There are some contraindications for the practice of Breathology. Furthermore, Breathology is a very powerful modality and Certified Breathologist serve in a responsible way with standards and procedures that they commit to. **Thus, PositivEnergyWorks, LLC reserves the right to accept or reject any applicant based on the answers to these questions.** "Thank you for your interest in PositivEnergyWorks, LLC™ and its services. There is "Power in the Breath " to Increase YOUR PositivEnergy™*Sekou Ayo Handy-Kendi*

PARTICIPANT RELEASE STATEMENT

I do hereby agree to release Sekou Ayo Handy-Kendi, CEO and proprietor of PositivEnergyWork, LLC™ (PEW) its principals, directors, agents, trainers, facilitators, contractors, advertisers, sponsors, and facility property owners and operators, and any individual or organization associated with PEW from any and all liability for personal injury, or loss of, or damage to, personal property or possessions of any individual attending or associated with PEW whether or not caused by negligence. I further assume all risk of injury or loss from participation in the programs of PEW, including but not limited to: breathology, breathwork, meditation, bodywork, healing touch, yoga, sound therapy, guided imagery/visualization, relaxation techniques, laughter, EFT, ceremonies, rituals, toning, Reiki, essential oil aroma therapy, massage, reflexology, alternative/complimentary therapies or any other form of participation in their course of study, instruction or experiential sessions. I also approve of any form of touch, healing touch or physical massage and can not claim any sexual or personal harassment. I further understand that PEW assumes no liability for any program and/or product performance and if there are any concerns, it is recommended that I check with my physician, therapist or other licensed health care provider before engaging in any of the above-mentioned activities.

I have read, understand and am in full agreement with the above RELEASE STATEMENT:

_____Signature:_____ Date:

I am the parent and/or guardian of the above minor and hereby endorse this Agreement on his/her behalf.

Signed _____ Date_____

INDIVIDUAL VIDEO RELEASE AGREEMENT

The undersigned enters into this agreement with _PositivEnergyWorks, LLC. (PEW)_(group name) ("Producer"). I have been informed and undersigned that Producer is producing a VIDEOTAPE OR videotape program on _____(date) and that my name, likeness, image, voice, appearance and performance is being recorded and made a part of that production ("Product").

1. I grant Producer and its designees the right to use my likeness, image, voice, appearance and performance as embodied in the Product whether recorded on or transferred to videotape, film, slides, photographs, audiotapes or other media, now known or later developed. This grant includes without limitation the right to edit, mix or duplicate, and to use or re-use the Product in whole or in part as Producer may elect.

2. I also grant Producer and its designees the right to broadcast, exhibit, market, sell and otherwise distribute the Product, either in whole or in parts, and either alone or with other products, for commercial or non-commercial television or theater, closed-circuit exhibition, home video distribution, internet, social media, YOUTube, or any other purpose that Producer or its designees in their sole discretion may determine. This grant includes the right to use the Product for promoting or publicizing any of the uses.

3. I confirm that I have the right to enter into this Agreement, that I am not restricted by any commitments to third parties, and that Producer has no financial commitment or obligations to me as a result of this Agreement. I hereby give all clearances copyright and otherwise, for the use of my name, likeness image, voice, appearance and performance embodied in the Product. I expressly release and indemnify Producer and its officers, unknown arising out of or in any way connected with the above granted uses and representations. The rights granted Producer herein are perpetual and worldwide.

4. In consideration of all of the above, I hereby acknowledge receipt of reasonable and fair consideration from Producer. I have read the foregoing and understand its terms and stipulations and agree to all of the above.

Signed _____ Date _____

I am the parent and/or guardian of the above minor and hereby endorse this Agreement on his/her behalf.

Signed _____ Date _____

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