

Application and Agreement for Participation in the BASSN Tantra Puja Group

Please print this form and complete highlighted items.

If you need a paper copy of this form, [click here](#) to send a request with your name and address.

Click [here](#) to download the form as a pdf file.

Name		Gender (M/F)*	
Address: street			
City, state, zip:			
Email address:		Phone:	
<p><i>* - BASSN appreciates and supports gender diversity and understands that not everyone identifies as Male or Female. For purposes of balancing energies in this group, we ask that each participant indicate the identity/energy they wish to have in the group.</i></p>			

1. Have you attended retreats or workshops dealing with the integration of Sexuality and Spirituality, Tantra, Sacred Sexuality, etc? Please list the organization or leader.

2. What are some things you would like to have included in this group?

3. Do you have any concerns or fears about the group? Any things that you would not want to do in the group?

AGREEMENT

Please check each box and sign below to indicate your agreement.

- I wish to participate in the Tantra Puja events held by BASSN. Along with all other participants, I make this agreement of my own free will in order to create a safe space for sexual/spiritual exploration. I am over the age of 18.
- I understand that the purpose of the group is to explore sacred sexuality and the sexual/spiritual experience, drawing on the teaching of the Tantra tradition and other contemporary teachers. I understand that the events are clothing optional from beginning to end, and that participants will be invited to be nude for some exercises.
- I will remain present, emotionally and physically, and will make conscious choices about my own level of participation.
- I intend good will and love toward everyone present, and will presume that others intend the same toward me. I will have compassion for others and acknowledge that the choices of others may be different from my own. I honor the boundaries of other participants without judgement.
- I will keep in confidence the names of other participants and what anyone else says or does.
- I take 100% responsibility for the quality of my own experience, including my safety, health, and well-being. I will seek support when I need to.
- I am in good physical and emotional health. I agree to be informed about and to abide by responsible sex practices while in the group, and to communicate any pertinent information about my health status to partners and/or the group as appropriate. I will consult with the group leaders in advance if I have any questions about aspects of my health status.
- I understand that my initial and continuing participation in the Tantra Puja events is entirely at the discretion of the BASSN core group.

Signed (name):	
Date:	

Please complete and sign this form and mail or fax it to:

Dan Murphy
10 Farm Pond Lane
Hollis, NH 03049

Fax: 603-465-6592
Fax via email: puja@boston.sexspirit.net