

# YAHWEH ROF'EKAH ECCLESIA FOUNDATION



## Overview:

I do hereby apply for membership in Yahweh Rof'ekah Ecclesia Foundation, hereafter termed "The Foundation", a private foundation. With the signing of this membership agreement, I accept the offer made to become a member of The Foundation and have read and agree with the following Declaration of Purpose, Preamble and Memorandum of Understanding.

## Declaration of Purpose:

The work The Foundation includes educating and serving The Foundation members so that they have all the latest knowledge in providing protocols, including but not limited to Natural Healthcare, Holistic Healing Practices, Homeopathy, creation and/or distribution of supplements, tinctures, ointments, salves, or any other natural form of healthcare practice to protect and improve the physical, mental, emotional, and/or spiritual health of members; and provide access to The Foundation protocols, including but not limited to protocols that include homeoprophylaxis and other homeopathic preparations. Secondary work includes, but is not limited to: grassroots, political, and economic efforts to ensure the protection of our work.

## Membership:

By consenting to the Membership Agreement provided, members are granted the following rights and benefits:

- Membership is granted through the Monthly and Annual Member Subscriptions only.
- Right to detailed informed consent about the services rendered, and what to expect.
- Upon request, access to The Foundation's Bylaws.
- Guarantee that all Personal Health Information (PHI) remain in the custody and in the confidential holding of The Foundation. PHI of all members will be held in strict confidentiality and will remain private from any State Medical Board, The FDA, FTC, Medicare, Medicaid or Insurance companies without the previously expressed specific permission granted by the member.

## Preamble

We proclaim the freedom to choose for ourselves the types of products, services, therapies and self-help modalities that we think best. We encourage our members to perform their own research by studying different resources to prevent illness, diseases of our minds and bodies, and for achieving and maintaining optimum wellness. We proclaim and reserve the right to include health options that include but are not limited to cutting edge treatment modalities and therapies practiced or used by any types of healers or therapists or practitioners the world over whether traditional or nontraditional, conventional, or unconventional.

Specifically, the mission of The Foundation is to change existing life and health circumstances through teaching alternative health awareness, which enables members to improve their physical well-being and to provide members with the highest-level services and of research and the most effective modalities for prevention. The Foundation will recognize any person (irrespective of age, race, creed, gender, or religion) who has been approved as a member and acts in accordance with these principles and policies as a member and will provide a medium through which its individual members may associate for actuating and bringing to fruition the purposes heretofore declared.

I understand that members and service providers within The Foundation are or may not be medical doctors.

I understand that within The Foundation no doctor-patient relationship exists but only a contract member to member foundation relationship. I have freely chosen to change my legal status as a public person or patient, customer, or client to a private member of The Foundation.

As I am voluntarily choosing this method of natural health care, wellness, and disease prevention, I will not hold The Foundation or its members financially liable for any particular outcome regarding my health.

I agree to discuss my concerns with The Foundation members and to seek appropriate medical treatment, homeopathic or otherwise, should the need arise.

I agree to join The Foundation, a private membership ministerial foundation under common law, whose members seek to help each other achieve better health and good quality of life.

I enter into this agreement of my own free will without any pressure of promise of cure or disease prevention. I affirm that I do not, or will not, as a private member represent any Local, State or Federal agency whose purpose is to regulate and approve products, or to carry out any mission of enforcement, entrapment or investigation and agree to accept membership in the capacity of private member. I have read and understood this document, and my questions have been answered fully to my satisfaction. I understand that I can withdraw from this agreement and terminate my membership in this association at any time. These pages consist of the entire agreement for my membership in The Foundation.

Payment of any dues, fees or program costs, if applicable, and delivery of these signed documents to a Foundation representative is considered sufficient for the membership contract. Term begins with the date of submission of this contract.

***Applicant Signature:***

***Dated:***

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