

2026 Daoist Neigong Foundation Application Form

Name:

Age (circle one): < 35 36-50 51-65 > 65

Current Occupation:

Country of Residence:

Do you need medication to control your blood pressure? If yes, what was your highest blood pressure reading.

Have you attended Master Cheung Tai Chi Qigong Level III training workshop? If yes, indicate month, year and location of the Level III workshop you attended.

Skip this question if you have attended Master Cheung's Tai Chi Qigong Level III workshop

How long have you been practising the techniques of the [Level 1, 2 and 3 Qigong Mode & Tai Chi Posture Requirements Courses](#)? (Please write down the months or years for each level, or state not yet started)

Is there anything else you want to tell us about yourself? (Limit to 60 words)

No recording in any form (video, audio or screen capture) is allowed during the workshop, notes taking is fine.

You are not allow to teach the neigong practices from this workshop without Master Wing Cheung's permission.

By signing here, I agree to the above 2 statements.

Signature: _____

Please submit this application form along with a recent photo of yourself which can see your face clearly (i.e. no head coverings or sunglasses) to qigong@taichi18.com. If you do not hear from us for more than 2 weeks, please resubmit your application to taichineigong@gmail.com