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a non-profit organization  
dedicated to  
holistic health research  
education and care

## East West Academy of Healing Arts

Effie Poy Yew Chow, PhD, RN, DiplAc.(NCCAOM)  
President

117 Topaz Way

San Francisco, CA 94131

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### “CALL FOR SPEAKERS/PRESENTERS/PAPERS

Dear Friends,

It will be the best Congress ever with world wide live stream video. For the very first time, the Twelfth World Congress on Qigong/TCM will partner with the 12<sup>th</sup> World Tai Chi and Qigong Day, two established mind/body events come together to address the most essential elements for the health of ourselves and the planet...pure energy, food, air and water. There is still time to participate as a presenter, exhibitor, cosponsor, donor, volunteer and more, in the Twelfth World Congress on Qigong/TCM and the 12<sup>th</sup> World Tai Chi and Qigong Day in San Francisco. The world needs to know of the awesome potentials of Qigong/Tai Chi to uplift humanity and restore balance to our planet. Practice of Qigong and Tai Chi is key to personal and planetary evolution. Read the latest reports in the [Wall Street Journal](#) and [Harvard Health](#). Dr. Mehmet Oz on Oprah advised: If you want to be healthy and live to one hundred, do Qigong!

With live streaming of simultaneous events worldwide (last year 65 countries participated in WTCQD), come to San Francisco and join world-class masters, scientists and performers in making history!

Please complete the attached forms for “Call for Speakers/Presenters/Papers. All applications due by 3/19/2010; you will be notified of acceptance on or before 3/23/2010.

Send abstract materials preferably by email attachment to eastwestqi@aol.com

Mailing address: EWAHA CONGRESS, 117 Topaz Way, San Francisco, CA. 94131.

Please indicate if you would like to present a one and one-half hour workshop on Sunday; a Masters Training Workshop on Monday from 9am-4pm ; ½ day 9am-12pm. Or 1 pm – 4pm. Please see the attachments for types of presentations and requirements of paper/abstract submissions. Indicate preferred type of presentation(s):

Workshop (90 min) ( Saturday or Sunday)	1-Day Master Training Course (Monday)
Interactive demonstration (45 min.)	½ -Day Master Training Course (Monday)

MEETING FORMAT: The Congress will include: Plenary Sessions featuring papers by invited speakers with subsequent audience interaction; Open Panel Sessions (90

Mind body spirit ONENESS self humanity universe

minutes) in which the audience will join with a panel of experts (15-20 minutes each paper) to discuss a variety of identified issues and research; Interactive Demonstration (45 minutes); Workshop Sessions (90 minutes); and Post Congress Full-day (9am-4 pm) or Half-Day (9am-12pm or 1pm to 4pm) Master Training Courses will be offered on Monday, April 26. All presentations will be in English. (Please provide your own translator, if necessary.)

WE NEED FROM YOU ALL THE FOLLOWING: Preferably email of your paper/abstract; as well as two hard copies (12 point Times font.), no faxes as the form may be used as a master copy for printing. Include Color Head Shot Photo.

Format of submission:

Abstracts must be typed on plain white paper within an area that is 4 1/2" horizontal by 7 1/2" vertical. Within this space, please type:

- The title of the paper on the first line. CAPITALIZE the entire title.
- On the next line, continue with family name(s) and initial (no punctuation) of the author(s), starting with the presenting author.
- Type in the speaker's organization in full including city, state and country. Do not include zip code.
- Leave one line blank before the main text. Single-space all text. Standard abbreviations are acceptable. Not to exceed 100 words for the abstract.
- Send Complete Paper

It is becoming the standard for national and international conferences to charge presenters the regular conference registration fee, however the Twelfth WCQ Program Committee has decided to discount the Congress registration fee to \$100 which will cover Congress costs including the World Tai Chi and Qigong Day festivities, admission to the Gala Event on Saturday evening with an exciting program of events, exhibits and entertainment. Each exhibit table will cost only \$100, and there is an opportunity for two presenters to share an exhibit table for the same amount. There will be a fee of only \$50 for presenters to attend each post Congress master workshop.

In light of all the amazing discoveries and heightened awareness in our field, we're certain you will want to be included with your significant work. We look forward to your participation!

Warmest wishes,



PhD, RN, DiplAc (NCCAOM), LicAc (CA),  
Congress Chair          Qigong Grandmaster



Ann Colichidas, MA, CPG  
San Francisco Coordinator

Attachments (3): Faculty Data Form, Presentation Abstract, Presenter Agreement

(All Presenters Complete — Please Type or Print)

## FACULTY DATA FORM

### **Presenter Information:**

Please list your name, title, and affiliations/organizations exactly how you want them to appear in the conference brochure and on your name badge.

*Example: William E. Roberts, M.D., Chief of Surgery, St. Joseph's Medical Center, Los Angeles, CA*

**Full Name:** \_\_\_\_\_

**Professional Designations:** \_\_\_\_\_

**Academic Affiliations:** \_\_\_\_\_  
Institution(s) and Position(s)

**Corporate Affiliations:** \_\_\_\_\_  
Company name and Position

### **Contact Information:**

**Organization:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City/State/Zip:** \_\_\_\_\_

**Country:** \_\_\_\_\_

**Phone: (Day)** \_\_\_\_\_ **(Eve)** \_\_\_\_\_

**Fax:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

**Web Site:** \_\_\_\_\_

**Audio / Visual Requirements:** \_\_\_\_\_  
(Microphones available; LCD provided main ballroom only)

**Brief Biography (55 words or less):** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Full Resume:** (Please Attach)

**PLEASE RETURN COMPLETED FORM TO:**

**East West Academy of Healing Arts**

117 Topaz Way, San Francisco, CA 94131

Tel: 415-285-9400 Fax: 415-647-5745

**Email: eastwestqi@aol.com**

(All Presenters Complete — Please Type or Print)

## PRESENTATION ABSTRACT

1. **Brief Description of Presentation** (55 Words or less): What you supply below will be used for informational and promotional purposes in the conference brochure. It is preferred that you submit this portion electronically by email to the address below.

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2. **Presentation Title:** \_\_\_\_\_

3. **Presentation Description** (approximately 100 words): \_\_\_\_\_

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4. **Goals and Objectives:**

1) \_\_\_\_\_

2) \_\_\_\_\_

3) \_\_\_\_\_

5. **Outline of Presentation with Timeframes** (Please attach)

6. **Full Paper** (Please attach)

**PLEASE RETURN COMPLETED FORM by March 17, 2010 TO:**

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Tel: 415-285-9400 Fax: 415-647-5745

Email: [eastwestqi@aol.com](mailto:eastwestqi@aol.com)

(All Presenters Complete — Please Type or Print)

## PRESENTER AGREEMENT FORM

My signature below confirms my agreement to present at the *Twelfth World Congress on Qigong/TCM and the 12th American Qigong Association Conference*, April 24-April 26, 2010 in San Francisco, CA.

Additionally this signed letter will give authorization to the Twelfth World Congress on Qigong/TCM and the 12th American Qigong Association Conference; and the East West Academy of Healing Arts or designee to use your name, lecture notes, lecture abstracts, video and/or audio recordings of the lecture in educational materials, publications, web sites or advertising associated with this or future conferences.

All presenters are required to submit the following:

Please forward these **by March 17, 2010**

- Faculty Data Form
- Presenter Abstract/Paper Form
- Presenter Agreement Form
- Color Head Shot photograph

I, \_\_\_\_\_ agree to speak at the Twelfth World Congress on Qigong/TCM and the 12<sup>th</sup> American Qigong Association Conference, April 24-26, 2010 and to the terms and conditions as noted above. Twelfth World Congress on Qigong/TCM reserves the right to schedule all speakers and presentations, or make any changes or cancellations as needed to the conference agenda.

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**PLEASE RETURN COMPLETED FORM by March 17, 2010 TO:**

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