



SACRED SAFETY AGREEMENT & WAIVER

This agreement invites you to affirm your sacred responsibilities as a participant. Please take time to read this document so we at SoulCentro can serve you in the best possible way, create a safe space for you and your retreat group, and the supporting staff. This sacred agreement also protects our ability to serve others beyond your retreat as well as our indigenous community, as we come into clear alignment regarding safety.

Here at SoulCentro, your safety is our upmost highest priority. In order to provide the most successful outcome, it is imperative that all guests follow our protocols and guidance 100% during the full duration of trip (including any preparatory or integrative experiences).

THIS ACTIVITY WAIVER & RELEASE (this "Agreement") dated: _____ (MM/DD/YY)
BETWEEN: _____

(the "Participant / Guest") AND SoulCentro of Paquera, Puntarenas, Costa Rica (the "Organizer")

IN CONSIDERATION OF the covenants and agreements contained in this Agreement and other good and valuable consideration, the receipt of which is hereby acknowledged, the parties to this Agreement agree as follows:

CONSIDERATION

1. Being of lawful age and inconsideration of being permitted to participate in the activity described below, having personally reviewed the benefits and potential challenges of iboga use, the Participant releases and forever discharges the Organizer and the Organizer's spouse, heirs, executors, administrators, legal representatives and assigns from all manner of actions, causes of action, debts, accounts, bonds, contracts, claims and demands for or by reason of any injury to person or property, including injury resulting in the death of the Participant, which has been or may be sustained as a consequence of the Participant's participation in the activity described below, and

notwithstanding that such damage, loss or injury may have been caused solely or partly by what may be perceived as negligence of the Organizer.

2. The Participant understands that the Participant would not be permitted to participate in the activity described below unless the Participant signed this Agreement.

DETAILS OF ACTIVITY

The Participant will participate in a retreat at SoulCentro in Paquera, Puntarenas, Costa Rica. Participation may include all activities, food, and accommodations as part of the retreat experience while at SoulCentro, including but not limited to:

- Partaking in Iboga plant medicine ceremonies
- Traditional Bwiti counsel
- Traditional Bwiti guided journey modality
- Yoga classes, breathwork and meditation sessions
- Onsite talks for ceremony instruction and integration
- Spiritual shower: Traditional Bwiti ritual with fresh herbs and plants (clothed)
- Leisure time
- Time in nature
- All meals and snacks
- Accommodations in single or double arrangements, as chosen by guest.

In addition, participation in preparation and integration activities includes but not limited to:

- Shared information & resources to support informed consent
- Medical pre-screening and consultation call
- 1:1 Bwiti counsel pre-retreat
- Group preparation call
- Group integration call
- One 1:1 Bwiti counsel integration session post-retreat
- Complimentary monthly integration call for past guests
- Any additional 1-on-1 services coordinated between the guest and the staff

SAFETY CONSIDERATIONS

The ceremony consists of Iboga root bark and/or its first extract and the Total Alkaloid (TA). The medicine may be administered in grounded, capsule, or liquid form (Tea).

Iboga is a very powerful and intuitive plant medicine that must be respected. It is not advised to mix Iboga with certain medicines, natural or pharmacological. Some interactions will even prove harmful, adverse, or fatal.

Any medicine, drug, herbal supplement, or medical issue must be cleared with our SoulCentro Medical Directors. It is imperative to remain 100% transparent and truthful on all paperwork, prescreening, conversations, and processes.

Ingesting drugs/medicines near time of treatment or thru the course of the retreat program may result in hospitalization and/or death, and may become grounds for immediate removal from participation/program.

No drugs, alcohol, or contraindicated medicines are allowed on the retreat property. Any prescriptions or drugs you may have brought with you must be cleared by or turned over to a SoulCentro Medical team member immediately.

The safety of this experience is ultimately in your own hands when it comes to following procedures and protocols in place to ensure it.

We encourage you to ask our team about any visions, thoughts, or insights that you may have experienced; understanding them can help you through your discovery process.

While participating with SoulCentro, failure to comply with the following protocols and guidelines is grounds for immediate dismissal from all indicated participation and removal from the grounds without refund, and relinquishes SoulCentro from any and all liabilities incurred.

GUEST CODE OF RESPECT

The Participant agrees to the following rules and stipulations during their stay at SoulCentro:

1. Respect the medicine and the Bwiti tradition we work with.
2. Respect and follow instructions and guidelines given by the SoulCentro team.
3. Respect the healing process of yourself and others in the group.
4. Respect the personal boundaries of others in the group.
5. Respect that everyone is undergoing their own experience, and deserves to have their own space, peace and quiet.
6. Respect the ceremonial space: Do not touch other guests in ceremony or throughout the retreat. Do not enter the private rooms of other guests. Move slowly and minimally. Receive physical help and guidance when offered.
7. Respect all guests and staff.
8. Privacy and presence is sacred: No cameras or recording equipment are allowed for guests throughout the entire retreat. Staff may take photos at times with notification to guests, and any photos with guests are taken with implicit permission only. There will be one optional group photo on the last day.
9. Sexual contact or overtures are not allowed at anytime on the retreat, between guests or with staff. Married couples should abstain from sexual contact the night before ceremonies and the day/night after ceremonies.

*** We have a zero tolerance policy against sexual harassment ***

Initials: _____

INTOLERABLE OFFENSES

1. Dishonesty or omissions with medical directors and providers regarding all medical and psychiatric conditions, medications, plant medicines, or other drugs.
2. Sexual harassment toward guests or staff, including verbal/non-verbal insinuation as well as direct physical contact.
3. Behavior that puts your own or others' safety at risk—including carrying travel tools or weapons such as pocket/utility knives.
4. Repetitive disruptive behavior inside or outside ceremony that creates discomfort for other guests, or significantly interferes with the healing process of other guests.
5. Leaving ceremony before it is over—no matter how much or little medicine has been ingested.
6. Bringing any form of recording equipment including a mobile phone to ceremony.

7. We have zero tolerance to the use of any substances, recreational or otherwise without the explicit consent of the medical directors and/or lead facilitator, including all prescription medications, pain killers, sleep medication, anti-diarrhea or any other medication, plant or pharmaceutical.

8. Leaving the SoulCentro grounds without prior arrangement with staff. In the event that a guest insists on leaving the retreat after medicine has been ingested—prior to SoulCentro advice, we reserve the right to take the guest to emergency service professionals immediately for safety purposes.

9. Theft of any kind.

10. Violations of the Guest Code of Respect.

The Participant agrees that by participating in any one of these intolerable offenses, they can be sent away or to emergency service professionals without question and without refund at the discretion of SoulCentro staff. The Participant would be responsible for any additional travel fees.

Initials: _____

INITIALS REQUIRED - Safety Agreement & Fitness to Participate

You as the Participant acknowledge that:

I understand and agree to be 100% truthful and transparent in all communications and interactions prior, during, and after the retreat. I have fully disclosed all health conditions and medications or substances that I have taken in the past and currently. If I have provided incorrect information or obscured details, that they may be endangering myself and others, I can be removed from the retreat without question and without refund at the sole discretion of SoulCentro staff.

Initials: _____

I give consent to receive all treatments, support, Bwiti counsel, ceremony, plant medicines, and activities that are offered through SoulCentro, at their sole discretion. I understand that I can decline consent at any time for any part of the retreat program. I understand that if I decline, facilitators may inquire or explain perspectives related to my decision. If I decline participation in any part of the retreat program, I understand and agree that SoulCentro *may* consider this disruptive or compromising to the integrity and safety of the traditional

ceremonial retreat container, I may not be given any further access to the medicine or retreat program, and I may be asked to leave the premises when I am physically able to do so at my own expense. SoulCentro is not liable for any costs incurred by early departure. I understand that SoulCentro is a dedicated ceremonial space for the traditional work, and it is not a general vacation space to utilize for other activities.

Initials: _____

All Participants, whether participating or not, must follow the instructions of the facilitators at all times so that my safety or the safety, healing process, and well-being of other guests is not jeopardized.

Initials: _____

Once a guest has ingested Iboga, in any form, the guest is required to remain on premises and under supervision until the SoulCentro team confirms that effects have lessened (up to 72 hrs). Guests can feel disoriented at times and/or may misjudge how affected they are. Guests should not wander off by themselves without communication with staff.

Initials: _____

I have fully disclosed all known physical limitations, medical ailments, psychiatric conditions, and physical or mental disabilities.

Initials: _____

I agree not to partake in any other psychoactive substances, drugs, medications, alcohol, or herbs & supplements for a minimum of **2 weeks prior** to the retreat up to **8 weeks prior**, according to the individual advice given by SoulCentro medical staff, **throughout the duration of the retreat** (unless given explicit consent by the medical directors), and a minimum of **2 weeks after** the retreat.

Initials: _____

I acknowledge that it is my responsibility to conduct due diligence with regards to my decision to experience the Iboga medicine. I understand that SoulCentro supports informed consent by offering extensive and accurate informational resources on the retreat webpage. I understand that information presented on internet forums or social media can often be inaccurate and unsafe, and I will defer to the advice of the SoulCentro team for all medical, psychiatric, and substance issues related to my participation with the Iboga medicine.

Initials: _____

I understand that I am responsible for creating an integration plan for myself. Each integration plan needs to be as unique as the individual. I acknowledge that SoulCentro has provided extensive information and resources regarding integration on the retreat website. I understand that SoulCentro offers complimentary monthly integration calls. It is my responsibility to voice my needs and requests for further support through the established modes of communication initiated.

Initials: _____

I do not have any preexisting cardiac, respiratory or other conditions/diagnosis that have not been cleared by SoulCentro.

Initials: _____

I am without any preexisting mental health diagnosis or symptoms for Schizophrenia or Psychosis.

Initials: _____

I understand that I should avoid strenuous activity until recovery from ingested medicine.

Initials: _____

I understand that I should do not eat at least 5 - 6 hrs prior to ceremony.

Initials: _____

I understand that Organizer is not responsible for the decision of any guest to stop taking medication or for changing their medication schedule, and accepts no liability for any adverse effects from doing so. The Participant acknowledges that SoulCentro has advised the Participant to seek medical advice and/or supervision from their prescribing doctor before reducing, ceasing, or changing any medication.

Initials: _____

I am not taking nor have not taken any SSRI,SNRI,NDRI containing medication for the past two weeks.

Initials: _____

SoulCentro does not treat guests for Benzodiazepine dependency. This will complicate the treatment and is prohibited (there is potential for seizures). I agree to abstain from **any and**

all benzodiazepines within the **two weeks prior to the retreat, throughout the duration of the retreat,** and **two weeks after the retreat** including (but not exclusive to) Valium, Ativan, Xanax, sleeping aids, etc. I acknowledge that I have been advised to seek medical supervision for titration with regards to the aforementioned. If a guest tests positive for Benzodiazepines, SoulCentro has the right to refuse treatment and that is grounds for dismal without refund.

Initials: _____

I agree to abstain from **stimulants** at least 4 weeks prior to the initial Iboga treatment, and at no time during the retreat stay. This includes methamphetamines, cocaine, crack, coca leaf or tea, Adderall, Ritalin, OTC caffeine pills, Ephedra, "energy drinks," or anything that fits into a stimulant category. No more than 1 regular caffeinated beverage such as tea or coffee beverage per day in the week prior to the retreat. Iboga can cause Tachycardia (increased heart rate), Stimulants can increase stress on the heart or exacerbate the effects of Iboga, resulting in many potential harmful situations.

Initials: _____

Coffee, chocolate, Bergamot, and grapefruit cannot be ingested the day of or immediately post ceremony.

Initials: _____

I agree to abstain from alcohol 4 weeks prior to the retreat. Alcohol is contraindicated to Iboga and is prohibited at any time during the entire retreat or extended stay time onsite, and any guest who is detoxing from this substance needs to be fully weaned off it 4 weeks prior to coming to the retreat, with a minimum of 2 weeks. Failure to do so may result in DT's, seizures, coma, death. If a guest arrives with alcohol in their system, SoulCentro has the right to refuse treatment and that is grounds for dismal without refund.

Initials: _____

I agree to abstain from smoking or consuming any products containing THC a minimum of 2 weeks prior to the retreat, and at no time during the retreat.

Initials: _____

Should any safety concerns arise, SoulCentro reserves the right to administer drug tests at our discretion. If a contraindicated substance is found in Participant system that was not previously discussed prior with Medical Directors, SoulCentro reserves the right to refuse any and all treatment and it is grounds for immediate dismissal from the program and property

without refund. Ingesting certain contraindicated substances surrounding Iboga may have fatal consequences.

Initials: _____

Should any safety concerns arise, SoulCentro reserves the right to perform random luggage searches at our sole discretion in order to ensure the safety of all guests and personnel. We do not perform invasive body searches.

Initials: _____

I understand the potential temporary side effects from the Iboga medicine and its therapeutic "mind-body-spirit purge": general psychological, emotional, and physical discomfort (at times), increased sensitivity, increased suggestibility (helpful in ethical therapeutic containers), neurogenesis, neuroplasticity, ataxia and lack of coordination, restlessness in limbs, emesis, sweating, dehydration, confusion, auditory hallucinations, nausea, visual light patterns, light sensitivity, change in bowel movement habits, changes in depth perception, anxiety, fearfulness, insomnia, amplification of psychological neurosis, confrontational visions, and the confusional and/or delusional state.

Initials: _____

I understand that rare potential side effects of Iboga (generally in conjunction with the consumption of contraindicated substances or the presence of contraindicated medical and/or psychiatric conditions) can present as: psychotic episode, tachycardia, other cardiac dysrhythmias, pulmonary embolism, and death.

Initials: _____

I understand that there are inherent risks of being in a wilderness environment that may cause injury or death.

Initials: _____

I am accepting of all risk for the consumption of Iboga offered at SoulCentro.

Initials: _____

I understand that Iboga can be a mentally, emotionally, and physically challenging and confrontational experience. I am willing to value challenge for therapeutic purposes.

Initials: _____

I am responsible for my belongings. SoulCentro cannot accept responsibility for theft or damage to belongings.

Initials: _____

I understand that in the unlikely event of an adverse reaction or psychotic episode related to the Iboga medicine, SoulCentro reserves the right to offer care and emergency protocol as is deemed fit by the facilitation team, including but not limited to the use of appropriate medication, the ability to retain the guest onsite for monitoring beyond the end of their retreat, and liaising with local emergency medical and hospital facilities. SoulCentro reserves the right to communicate with the next of kin or the emergency contact.

Initials: _____

I understand that SoulCentro has the right to refuse treatment if staff feels that I am not physically or mentally fit for treatment upon arrival, without refund. I understand that SoulCentro reserves the right to expel any guest at their sole discretion without prior notice, responsibility for a refund, or providing accommodation outside of the retreat center. Should a Participant decide to leave a retreat prematurely for any reason, SoulCentro is not responsible for the reimbursement of monies, damage, injury, loss, or for denouncements by the attendee.

Initials: _____

I have been advised by SoulCentro to avoid the contraindicated drugs, medicines, substances, herbs, supplements, and alcoholic drinks post treatment as these can still cause dangerous physical, psychological, or spiritual reactions **up to two weeks or more after the retreat**. SoulCentro is not responsible for any reactions to substances I ingest post treatment.

Initials: _____

FULL AND FINAL SETTLEMENT

1. The Participant hereby acknowledges and agrees that the Participant has carefully read this Agreement, that the Participant fully understands the same, and that the Participant is freely and voluntarily executing the same.

2. The Participant understands that by signing this Agreement, the Participant agrees to be

forever prevented from suing or otherwise claiming against the Organizer for any property loss, personal injury, or death that the Participant may sustain while participating in or preparing for the above noted activity.

3. The Participant has been given the opportunity and has been encouraged to seek independent legal advice prior to signing this Agreement.

4. This Agreement contains the entire agreement between the parties to this Agreement and the terms of this Agreement are contractual and not a mere recital.

GOVERNING LAW

This Agreement will be construed in accordance with and governed by the laws of the Province of Puntarenas, Costa Rica.

IN AGREEMENT the Participant has affixed their signature underhand prior to the start of their participation at SoulCentro:

NOTE: You will be required to sign a copy of the above Waiver upon arrival at the retreat. Accepting the Terms & Conditions during registration indicates you have read and accept the above.

IT ONLY WORKS... IF YOU WORK IT
BASSÉ

_____(Participant printed name)

_____(Date)

_____(Participant signature)

