



# 国际健身气功联合会

## INTERNATIONAL HEALTH QIGONG FEDERATION

### The 11th World Health Qigong Tournament and Exchange

## NOTICE

#### I. Date and location

Date: July 21st to July 27th, 2025

Date of arrival: July 21st, 2025

Date of departure: July 28th, 2025

Location: Vancouver, Canada

#### II. Host

International Health Qigong Federation (IHQF)

#### III. Organizer

Canada International Health Qigong Association

#### IV. Supporting organizer

Chinese Health Qigong Association (CHQA)

#### V. Events

A. the 11th World Health Qigong Tournament and Exchange

1. Exchange and competition
2. Health Qigong training (including routines and referee training)
3. Mass demonstration

B. Meeting of IHQF Executive Board

#### VI. Schedule

| DATE                 | TIME        | ACTIVITIES  | PLACE |
|----------------------|-------------|---|-------|
| 21-July<br>Monday    |             | Arrival and Registration                                  | TBD   |
|                      | 10.00-17.00 | Meetings of IHQF Executive Board                          | TBD   |
| 22-July<br>Tuesday   | 09:00-12:00 | Health Qigong training                                    | TBD   |
|                      | 14:00-18:00 |   |       |
| 23-July<br>Wednesday | 09:00-12:00 | Health Qigong training                                    | TBD   |
|                      | 14:00-18:00 |   |       |
| 24-July<br>Thursday  | 09:00-17:00 | Mass demonstration<br>International Cooperation Challenge | TBD   |

|                     |             |   |     |
|---------------------|-------------|---|-----|
| 25-July<br>Friday   | 09:00-12:00 | Health Qigong training                              | TBD |
|                     | 14:00-18:00 |   |     |
|                     | 19:30-20:30 | Team leaders' meeting                               | TBD |
| 26-July<br>Saturday | 09:00-10:00 | Opening ceremony                                    | ①   |
|                     | 10:00-18:00 | Group and individual competitions                   | ①   |
| 27-July<br>Sunday   | 09:00-17:00 | Group and individual competitions<br>Award ceremony | ①   |
|                     | 19:00-22:00 | Farewell Party                                      | ②   |
| 28-July<br>Monday   |             | Departure of all Participants                       |     |

① Richmond Olympic Oval    ② Continental Seafood Restaurant

Note: Please pay attention to the notice of Organizing committee for more accurate schedule.

## VII. Fees

### A. Accommodation

Note: The Organizing Committee is selecting the recommended accommodation for participants. Details will be announced later.

### B. Competition fees

1. Group/Individual competition: US\$35/team/event/person
2. International Cooperation Challenge: US\$35/team/event/person

Note: If you pay in full before March 31st, 2025, you can enjoy 10% off the competition fees (the early bird discount). **Fees paid are non-refundable.**

### C. Training fee

Detailed training contents and fees will be announced later.

### D. Other fees (optional)

Banquet: US\$65/per person.

## VIII. Registration and accreditation

- A. Member organizations of the International Health Qigong Federation and other organizations are kindly requested to complete the attached forms as required and send by e-mail or Mail to **Canada International Health Qigong Association** (Note: Teams from Hong Kong, Macau and Taiwan regions must be registered by the member organization).
- B. Deadline for registration and full payment is 24:00 on June 21th 2025 (Vancouver time). Registration after June 21th (excluding) will be subject to a special service fee of 10% of the total registration fee.
- C. Participants registered after June 21th 2025 can participate in the training and competition, but will not be included in the Program Book of the Event.
- D. Check-in date: Participants for Training courses should arrive on July 21st.
- E. Check-in location: TBD

## IX. Other matters

1. Each delegation must submit the Original of the Entry Forms and 1 copy of the Participants' Responsibility Statement to the Organizing Committee.
2. Participants must purchase their own Life Insurance and provide evidence on registration. The delegation and/or the individual must undertake responsibility for any illness or injuries occurring during the events.
3. Entry forms of the events may be downloaded from the following websites:  
IHQF official website: [www.ihqfo.org](http://www.ihqfo.org)

#### **X. Contacts:**

##### **A. Canada International Health Qigong Association**

Contact person: Mr. Ken LOW, Ms. Lai Chun CHEUNG

Tel: 001-604-7198388, 001-604-7811739

E-mail: [kenlow@shaw.ca](mailto:kenlow@shaw.ca)

##### **B. International Health Qigong Federation**

Mr. Wu Zhipeng

Tel: +86 10 87187160

E-mail: [headoffice@ihqfo.org](mailto:headoffice@ihqfo.org)

#### **XI. Matters not mentioned herein will be advised later.**

#### **XII. The Organizing Committee of the 11th World Health Qigong Tournament and Exchange reserves the right for further interpretation of this Circular.**

## Appendix 1

### THE 11TH WORLD HEALTH QIGONG TOURNAMENT AND EXCHANGE

## Team/Individual Competition Regulations

#### 1. Date

July 25th to July 26th, 2025

#### 2. Location

Richmond Olympic Oval, Vancouver, Canada

#### 3. Competition Disciplines

- (1) Health Qigong·Yi Jin Jing
- (2) Health Qigong·Wu Qin Xi
- (3) Health Qigong·Liu Zi Jue
- (4) Health Qigong·Ba Duan Jin
- (5) Health Qigong·Da Wu
- (6) Health Qigong·Dao Yin Yang Sheng Gong Shi Er Fa
- (7) Health Qigong·Taiji Yang Sheng Zhang
- (8) Health Qigong·Ma Wang Dui Dao Yin Shu

#### 4. Participation Methods & Rules

- (1) All IHQF Member Associations and the relevant social organizations may send multiple teams to the tournament (Teams from Hong Kong, Macau and Taiwan regions must be registered by the member organization). Each team consists of a maximum of ten (10) participants, including one (1) team leader, one (1) coach and eight (8) athletes. Competing team athletes must be in good physical condition. The team leader may serve as a coach, The team leader and coach may also serve as a competing athlete.
- (2) There will be Group and Individual Competitions. The Group Competition consists of a minimum of four (4) and a maximum of eight (8) athletes regardless of gender and age. Each team may register for multiple disciplines. The Individual Competitions will be classified by gender and age. There will be three (3) age groups: under 39 (inclusive), 40 ~ 64, and above 65 (inclusive). The age group classification shall be subject to June 30th, 2025. Each individual may register for multiple disciplines. After the registration deadline, if there are less than 2 teams registered for a group competition and less than 3 people registered for an individual competition, the Organizing Committee will issue a notice of cancellation of the related event and allow the relevant participants to change their registration once.

#### 5. Competition Method

- (1) The < Rules for International Health Qigong Competition (trial version)> (reviewed, adopted and published by the Chinese Health Qigong Association) shall be designated by the IHQF.

( 2 ) Competitors at Group competition march in triangular format and each team with more than 4 members is in 2 rows, forming a parallelogram.

( 3 ) Competitors at individual competitions march in a dash line, staggering in 2 rows.

( 4 ) Competing disciplines at Group and Individual Competitions are the ABBREVIATED VERSION of the original exercise compiled by the Chinese Health Qigong Association. The ABBREVIATED VERSION MUSIC WITHOUT oral prompt applies in the competition. (Both of the competition music and practice music with oral prompt are available on the IHQF official website)

## **6. Ranking and Awards**

( 1 ) Awards of Gold, Silver and Bronze are set up in each discipline in Group and Individual Competitions. For each ranking, 20% of awards of Gold, 30% of Silver and 50% of Bronze are given to the athletes/teams in single discipline respectively. Places of all the awards are calculated per round-off principle.

( 2 ) All-around awards will be added for Individual Competition. According to gender and age groups, for those who apply for more than two disciplines (inclusive) for the old disciplines (YJJ, WQX, LZJ and BDJ) and apply for more than two disciplines (inclusive) for the new disciplines (other except YJJ, WQX, LZJ and BDJ), the individual all-around awards will be set up, and the top three of each gender and age group will be awarded the champion, runner-up and third runner-up prizes. From all the disciplines participated by the athletes, the best two old disciplines and the best two new disciplines, a total of four disciplines, are selected to calculate the sum; At the same time, if an athlete participates in more than four disciplines, each discipline not included in the sum score will be awarded a dependent bonus point according to the ranking of the individual competition (0.5, 0.3 and 0.2 bonus points for the first, second and third prizes, respectively), and the cumulative total score will be the final award result.

( 3 ) Trophy and diploma are given to the awarded team in group competition, medal and diploma to the awarded athlete in individual competition; Trophy and diploma to the awarded athlete in all-around competition.

## **7. Referees and Jury**

The Jury members, Chief Referees and the Head Referees for the Competition shall be appointed by the IHQF. The referees at competition shall be those selected from the referees Instruction Course of this event while the assistant referees are from the organizer.

## **8. Application and Registration**

Participating organizations are requested to complete the Participants Entry Form of the 11th World Health Qigong Tournament and Exchange, and the Participants Arrival and Departure Schedule (see Appendix) and send them via e-mail or mail to Canada International Health Qigong Association by June 21st, 2025. Once entries to events are confirmed, no change or alteration is allowed.

## **9. Other matters**

( 1 ) The attires of the competitors shall be in keeping with Health Qigong characteristics. The style and color of members of a team for group competition shall be uniform. The shoes shall be those suitable for Health

Qigong exercises. Competitors on the competing floor shall wear the bib distributed by the organizing committee.

- ( 2 ) All team leaders and coaches are requested to be present for the technical meeting as scheduled at 19:30 July 24th, 2025.

## Appendix 2

# THE 11TH WORLD HEALTH QIGONG TOURNAMENT AND EXCHANGE International Cooperation Challenge Regulation

### I. Date

July 27th, 2025

### II. Location

Richmond Olympic Oval, Vancouver, Canada

### III. Method of participation

The Challenge mainly tests the cooperation level of the team members and the spirit of the team members to challenge and innovate in a short period of time, so as to promote the communication of members from different teams.

(1) The competition team shall be composed of the players of each representative team who have signed up for this competition item by drawing lots temporarily before the Game, reflecting the spirit of international cooperation and challenge. Each temporary "international" team, regardless of gender and age, has 4-6 members, which will be determined by the Organizing Committee according to the registration situation.

(2) The draw ceremony will be organized before the Game. The specific date will be announced later.

(3) The temporary challenge team can start online or onsite preparation after the draw. Communicate by yourself, customize the theme of the competition, select music, arrange the combination of Health Qigong movements (allowing the use of simple props), and arrange rehearsals by yourself before the competition.

(4) The movements of the challenge competition can be selected from the nine internationally promoted routines of Health Qigong (Yijinjing, Wuqinxi, Baduanjin, Liuzijue, Taiji Yangshengzhang, Dawu, Daoyin Yangshenggong 12fa, 12 Duanjin, Mawangdui Daoyinshu) for diversified combinations, but the selected movements are required to be complete.

(5) Choose your own music for no more than 4 minutes. After the performance, each team will spend 2 minute to introduce the cooperation highlights of your team.

### IV. Evaluation method

(1) Arrange three judges to make a comprehensive judgment on the standardization, performance, innovation, cooperation of the team movements, as well as the spirit of cooperation reflected in the final team introduction.

(2) Teams compete one by one. After each team's performance, the judges will comment on it.

### V. Admission ranking and awards

(1) The following series of awards will be selected by the judges:

A. Most Popular Team Award (three teams)

B. International Friendship and Cooperation Award (teams other than the Most Popular Team Award)

C. Best Costume Ensemble Award

D. Most Popular Male player

E. Most Popular Female Player

(2) Diplomas will be awarded for the A/B/C awards, trophies and diplomas will be awarded for the D/E awards.

## **VI. Judges**

The judges are appointed by the International Health Qigong Federation.

## **VII. Other matters**

1. Attire is required to be in accordance with the stated Health Qigong uniform/clothing Characteristics, as well as Health Qigong sports shoes. Players must wear the bib number at all times during the competition.

2. All related team leaders should attend the online draw held on July 1st, 2025. The absent teams shall be represented by Organizing Committee staff.

3. Players need to purchase insurance by yourselves and bear the responsibility for accidents such as injuries and diseases that occur during the competition.

### Appendix 3

## THE 11TH WORLD HEALTH QIGONG TOURNAMENT AND EXCHANGE

### PARTICIPANTS' RESPONSIBILITY STATEMENT

Of my own volition, I would like to attend the 11th World Health Qigong Tournament and Exchange and promise to bear all consequences of any accidents or legal disputes, including any claim for damages, actions and requests during the event. Meanwhile, myself, my heirs, personal assistant, agent and representative shall not sue either the Organizing Committee or the host. I hereby agree and comply with all the Tournament regulations made by the International Health Qigong Federation. I shall respect the Jury's decisions on any of the disputed matters. During the event, I agree to be photographed, video recorded or televised live. Also, I shall agree my name, address, voice, actions, image or figures to be used wholly or partially by the International Health Qigong Federation and All Japan Health Qigong Union on TV coverage, radio broadcasting, video recording, media figure or any other media equipment and shall not demand any payment or compensation.

I am aware of and fully understand the above statement.

(Parents or the legal guardians are requested to sign if the participants are minors.)

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Signature:

Parent / legal guardian signature:

Date:

**Appendix 4 – Form 1**

**THE 11TH WORLD HEALTH QIGONG TOURNAMENT AND EXCHANGE  
REGISTRATION FORM**

|  |              |
|--|--------------|
| Country/region                             |              |
| Name of organization                       |              |
| Number of teams to tournament              |              |
| Number of athletes to tournament           |              |
| Number of participants to training classes |              |
| Total number of participants               |              |
| Name of the team leader                    |              |
| Contact of team leader                     |              |
| Accommodation requirement:                 | Total rooms: |
| Class-A    Single        Twin              |              |
| Class-B    Single        Twin              |              |

Please send it to Canada International Health Qigong Association before June 21st, 2025.

Applicant organization:

\_\_\_\_\_

Tel:

\_\_\_\_\_

E-mail:

\_\_\_\_\_

Signature of Person-in Charge:

Date:

\_\_\_\_\_

**Appendix 4 – Form 2**

**Entry Form of the 11th World Health Qigong Tournament and Exchange**

Country/Region:

Delegation:

Leader of the delegation:

Coach:

| No. | Name | Gender | D.O.B<br>(DD/MM/YY) | Passport No. | Team competition |           |            |             |       |           |                     | Individual competition |             |           |            |             |       | Cooperation<br>Challenge |           |                     |
|-----|------|--------|---------------------|--------------|------------------|-----------|------------|-------------|-------|-----------|---------------------|------------------------|-------------|-----------|------------|-------------|-------|--------------------------|-----------|---------------------|
|     |      |        |                     |              | Yi Jin Jing      | Wu Qin Xi | Liu Zi Jue | Ba Duan Jin | Da Wu | Shi Er Fa | Yang Sheng<br>Zhang | Ma Wang<br>Dui         | Yi Jin Jing | Wu Qin Xi | Liu Zi Jue | Ba Duan Jin | Da Wu |                          | Shi Er Fa | Yang Sheng<br>Zhang |
| 1   |      |        |                     |              |                  |           |            |             |       |           |                     |                        |             |           |            |             |       |                          |           |                     |
| 2   |      |        |                     |              |                  |           |            |             |       |           |                     |                        |             |           |            |             |       |                          |           |                     |
| 3   |      |        |                     |              |                  |           |            |             |       |           |                     |                        |             |           |            |             |       |                          |           |                     |
| 4   |      |        |                     |              |                  |           |            |             |       |           |                     |                        |             |           |            |             |       |                          |           |                     |
| 5   |      |        |                     |              |                  |           |            |             |       |           |                     |                        |             |           |            |             |       |                          |           |                     |
| 6   |      |        |                     |              |                  |           |            |             |       |           |                     |                        |             |           |            |             |       |                          |           |                     |
| 7   |      |        |                     |              |                  |           |            |             |       |           |                     |                        |             |           |            |             |       |                          |           |                     |
| 8   |      |        |                     |              |                  |           |            |             |       |           |                     |                        |             |           |            |             |       |                          |           |                     |
| 9   |      |        |                     |              |                  |           |            |             |       |           |                     |                        |             |           |            |             |       |                          |           |                     |
| 10  |      |        |                     |              |                  |           |            |             |       |           |                     |                        |             |           |            |             |       |                          |           |                     |

N.B.: 1. Please tick  $\sqrt$  where applicable. 2. This form can be copied. 3. Please send the form to Canada International Health Qigong Association before June 21st, 2025.

Contact Person: \_\_\_\_\_ Tel: \_\_\_\_\_ Fax : \_\_\_\_\_ E-mail: \_\_\_\_\_

Signature of Person-in Charge: \_\_\_\_\_ Date: \_\_\_\_\_

**Appendix 4 – Form 3**

**Entry Form of the Health Qigong Training Classes**

Country/Region:

Delegation:

| No. | Name | Gender | D.O.B<br>(DD/MM/YY) | Health Qigong Forms |  |  | Current Duan Level |
|-----|------|--------|---------------------|---------------------|--|--|--------------------|
|     |      |        |                     |                     |  |  |                    |
| 1   |      |        |                     |                     |  |  |                    |
| 2   |      |        |                     |                     |  |  |                    |
| 3   |      |        |                     |                     |  |  |                    |
| 4   |      |        |                     |                     |  |  |                    |
| 5   |      |        |                     |                     |  |  |                    |
| 6   |      |        |                     |                     |  |  |                    |
| 7   |      |        |                     |                     |  |  |                    |
| 8   |      |        |                     |                     |  |  |                    |
| 9   |      |        |                     |                     |  |  |                    |
| 10  |      |        |                     |                     |  |  |                    |

1. The form can be copied.      2. Please send the form to Canada International Health Qigong Association before June 21st, 2025.

Contact Person: \_\_\_\_\_ Tell: \_\_\_\_\_ Fax : \_\_\_\_\_ E-mail: \_\_\_\_\_

Signature of Person-in Charge:

Date: .

**Appendix 4 - Form 4**

**TRAVEL FORM OF THE 11TH WORLD HEALTH QIGONG TOURNAMENT AND EXCHANGE**

Country/Region:

Delegation:

| No. | Arrival    |              |              |                   | Departure  |                |                |                   |
|-----|------------|--------------|--------------|-------------------|------------|----------------|----------------|-------------------|
|     | Flight No. | Arrival Time | Arrival Date | Number of persons | Flight No. | Departure Time | Departure Date | Number of persons |
| 1   |            |              |              |                   |            |                |                |                   |
| 2   |            |              |              |                   |            |                |                |                   |
| 3   |            |              |              |                   |            |                |                |                   |
| 4   |            |              |              |                   |            |                |                |                   |
| 5   |            |              |              |                   |            |                |                |                   |
| 6   |            |              |              |                   |            |                |                |                   |

1. the form can be copied. 2. Please send the form to Canada International Health Qigong Association before June 21st, 2025.

Contact Person: \_\_\_\_\_ Tell: \_\_\_\_\_ Fax : \_\_\_\_\_ E-mail: \_\_\_\_\_

Signature of Person-in Charge:

Date:

**Appendix 4 - Form 5**

**Payment Information and Form of the 11th World Health Qigong Tournament and Exchange and  
the 6th World Health Qigong Scientific Symposium**

| No. | Name | Gender<br>(M/F) | D.O.B<br>(DD/MM/YY) | Passport<br>No. | Group<br>competition<br>(Prices in US\$) | Individual<br>competition<br>(Prices in US\$) |  | Health Qiong<br>class (US\$) |  | Farewell<br>Party<br>(US\$) | Accommodation<br>(US\$) | TOTAL<br>(US\$) |
|-----|------|-----------------|---------------------|-----------------|--|---|--|------------------------------|--|-----------------------------|-------------------------|-----------------|
| 1   |      |                 |                     |                 |  |   |  |                              |  |                             |                         |                 |
| 2   |      |                 |                     |                 |  |   |  |                              |  |                             |                         |                 |
| 3   |      |                 |                     |                 |  |   |  |                              |  |                             |                         |                 |
| 4   |      |                 |                     |                 |  |   |  |                              |  |                             |                         |                 |
| 5   |      |                 |                     |                 |  |   |  |                              |  |                             |                         |                 |
| 6   |      |                 |                     |                 |  |   |  |                              |  |                             |                         |                 |
| 7   |      |                 |                     |                 |  |   |  |                              |  |                             |                         |                 |
| 8   |      |                 |                     |                 |  |   |  |                              |  |                             |                         |                 |
| 9   |      |                 |                     |                 |  |   |  |                              |  |                             |                         |                 |
| 10  |      |                 |                     |                 |  |   |  |                              |  |                             |                         |                 |
| 11  |      |                 |                     |                 |  |   |  |                              |  |                             |                         |                 |
| 12  |      |                 |                     |                 |  |   |  |                              |  |                             |                         |                 |
| 13  |      |                 |                     |                 |  |   |  |                              |  |                             |                         |                 |
| 14  |      |                 |                     |                 |  |   |  |                              |  |                             |                         |                 |
| 15  |      |                 |                     |                 |  |   |  |                              |  |                             |                         |                 |
| 16  |      |                 |                     |                 |  |   |  |                              |  |                             |                         |                 |
| 17  |      |                 |                     |                 |  |   |  |                              |  |                             |                         |                 |
| 18  |      |                 |                     |                 |  |   |  |                              |  |                             |                         |                 |

Please send the form to Canada International Health Qigong Association before June 21st, 2025.

## **Appendix 4 - Form6**

### **Payment Information and Form of the 11th World Health Qigong Tournament**

We are committed to providing the best attendee experience and ensuring an efficient and secure registration process. Please pay all participation fees by bank transfer before participating. The prepayment process for training fees, entry fees and other related expenses is as follows:

1. The registration unit is responsible for submitting the registration information of all participants of the unit uniformly.
2. The registration unit is responsible for submitting the fees for all participants of the unit in a unified manner.
3. The registration unit is responsible for filling out and submitting this form (Appendix 4).
4. The final payment must reach the Canada International Health Qigong Association account before July 21st, 2025.
5. If pay in full before March 31, 2024, you can enjoy early bird discount on competition fees.
6. Registration after June 21st (excluding) will be subject to a special service fee of 10% of the total registration fee.
7. Bank information of Canada International Health Qigong Association (next page):



**Royal Bank of Canada**  
**Kingsway & Joyce**  
3318 Kingsway  
Vancouver, BC  
V5R 5K7  
P: 604-665- 3889  
F: 604-665-5861

## Incoming Wire Transfer

|  |  |
|--|--|
| <b>Bank Name</b>                       | Royal Bank of Canada                                     |
| <b>Financial Institution #</b>         | 003  |
| <b>SWIFT Code</b>                      | ROYCCAT2   |
| <b>Beneficiary Name</b>                | HEALTH QIGONG CANADA<br>ASSOCIATION                      |
| <b>Beneficiary Address</b>             | 3435 KINGSWAY<br>VANCOUVER BRITISH<br>COLUMBIA<br>V5R5L3 |
| <b>Beneficiary Transit #</b>           | 06840  |
| <b>Beneficiary Transit<br/>Address</b> | 3318 KINGSWAY ,<br>VANCOUVER , BC, V5R 5K7<br>CANADA     |
| <b>Beneficiary Account #</b>           | 1006600  |

Note: The remitter (payer) shall bear the intermediary fee (receiving bank fee) for the remittance. The amount remitted shall be the actual amount receivable by the Organizer according to the fee standards.