House of Re Ministries
www.houseofre.faith
sandee4prayer@gmail.com



CONFIDENTIAL FOR PURPOSES OF PRAYER MINISTRY

Ministry Release Please print clearly			
First Name:			
Last Name:			
Parents Name:	(If a child is needing ministry)		
STATEMENT OF RELEASE	FROM LIABILITY		
I hereby acknowledge that I have voluntarily appl	ied to receive ministry for inner healing.		
I understand that my participation in Inner Healin	ng Prayer Ministry is not		
1. A substitute for my active involvement in	a local Christian church body of my choice.		
A substitute for psychiatric treatment, any other form of professional counsellin			
I am voluntarily participating in Inner Hea	aling Prayer Ministry provided by facilitators		
with full knowledge of these facts. I accept for mental, emotional, spiritual and physical well			
	do not claim to be trained counsellors, nor		
do they claim knowledge and expertise in a			
suicide, life or death situations, or other area	• • • • • • • • • • • • • • • • • • • •		
I accept that Prayer Ministry facilitato	•		
confidentiality and anonymity concerning inf	•		
	y cannot be guaranteed, as in the disclosure		
of information of an illegal or life-threatening	,		
I HAVE READ THIS AGREEMENT AND FULLY UNDER			
THIS IS A RELEASE FROM LIABILITY AND AN AGR	EEMENT BETWEEN ME AND THE PRAYER		
MINISTRY FACILITATORS. I SIGN THIS AGREEMENT			
ALL INFORMATION HEREIN IS ACCURATE AND TRUE	·		
CIONATURE			
SIGNATURE / The signature of a Parent or Local Cuardian is required if	f the applicant is under the age of 10)		
(The signature of a Parent or Legal Guardian is required if DATE			

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Spiritual (Please Print)

I have accepted Jesus Christ as my personal Lord and Saviour



Yes No If Yes: Age Water Baptized Yes No Baptized in the Holy Spirit Yes No What church do you currently attend?______ How long have you attended this church?_____ Do you attend regularly? Yes No Is your pastor aware that you are seeking Prayer ministry? Yes No Personal information Separated **Marital Status** Single Engaged Married Divorced Remarried Widowed For Those Married: Is your spouse aware that you are seeking Prayer ministry? Yes No eldest child middle child Position in family: only child voungest child Yes Are your parents living? No Do you have a good relationship with - Father Yes No - Mother Yes No Grand-parents (father's side) Yes No Grand-parents (mother's side) Yes No Have you been a prior recipient of Prayer ministry? (e.g., deliverance, Theophostic) Yes No If Yes, please explain: Are you currently on any medication(s)? Yes No If Yes, what type of anti-depressant/ anti-psychotic medication(s) you are on and why: Name Reason Reason____ Are you currently under the care of a counselor, psychiatrist or other therapist? Yes No If Yes, briefly explain for what reason(s):______

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Strongholds: Tick any of the below where you identify with or had any involvement past or present

Astrology Black magic/arts		Blood Oaths	Clairvoyance			
Color Therapy	Control	Divination	Role Play Games			
Fortune Telling	Good Luck Charms	Horoscopes	Hypnosis			
Martial Arts	Mediums	Mind Control	Occult Movies			
Crystals	Occult Practices	Ouija Board	Piercing			
Psychic Readings	Rituals/Sacrifices	Séance	Acupuncture			
Spell/Hex/Nex	Spirit Guide(s)	Tarot Cards	Tattooing			
Violent Movies	Voodoo	Witchcraft	Drugs			
Religions, Cults, Sects, and Secret Societies						

(That you or anyone in your family line have been or are involved in.)

Animism	Baha'i	Buddhism	Christian Science
Demolay	Eastern Star	Fraternity	Freemasonry
Hari Krishna	Hinduism	Jehovah's Witnesses	Job's Daughters
Moonies	Mormonism	New Age Movement	Paganism
Islam	Rainbow Girls	Sorority	Spiritism
Yoga	Masonic Lodge	Unitarian Universalism	Satanism
Taoism	Reiki	Other: (List)	

Do you have (or have had) any issue/problems with the following

Anger	Argument	Berserk	Confusion	Control	Criticism
Domination	Fear	Hatred	Perversion	Profanity	Intellectualism
Rebellion	Victimizing	Violence	Death/Death Wish	Abortion	Prostitution
Theft	Phobias	Depression	Discouragement	Despair	Perverted Sex
Betrayal	Grief	Hopelessness	Inadequacy	Inferiority	Incest
Rejection	Sadness	Sleepiness	Suicide	Weariness	Fornication
Grudges	Lust	Doubt	Perverted Dreams	Rape	Pornography
Murder	Envy	Loneliness	Child Abuse	Adultery	Homosexuality
Rage	Shame	Revenge	Abandonment	Trauma	Dark thoughts
Eating Disorder(s) Addiction:		ion:	Other:		