

AGREEMENT FOR PRAYER MINISTRY

This ministry is called prayer ministry. It is not professional counseling. We work with you only as you choose to work with us. We are strictly Christians seeking the Lord in prayer on your behalf.

God has seen fit to work with and through us in moving people toward freedom from spiritual, emotional, and even physical problems. Therefore, it is our expectation that He will help you through our time together. But we cannot control God or promise what He will do. We can only promise that we will do our best to work with God for your good and God's glory.

What usually happens in this type of ministry is that God brings a kind of "spirit" toward wholeness in each session. Often additional work is necessary for a person to attain the complete freedom he/she and God desire. It may be advisable for the person to receive help from a professional counselor as well. We strongly advise this, especially in dealing with dysfunctional habits. It is always advisable for the person to actively pursue spiritual disciplines such as church attendance, prayer, Bible study and worship.

We are committed to keeping confidential whatever you share with us. However, we are required by law to report the following:

1. Any intent of a person to take harmful, dangerous, or criminal action against another person or against him/herself, OR
2. Any act of child or elderly abuse or neglect.

If it appears that such notification needs to be given, that intention will be shared with you first.

In order to provide the appropriate legal protection, we ask that each person sign the following Statement of Release.

I hereby release Sacramento Healing Prayer Ministry and Real Life Church from any liability should this ministry session not live up to my expectations or lead to any spiritual, emotional, or physical dysfunction.

Signed Client _____ Print Name _____

Date _____ Email _____ Phone _____

Prayer Minister Signature _____ Date _____

INTAKE FORM: Personal History Questionnaire

Name _____ Sex ____ Age ____

Address _____

Occupation _____ Education (highest grade completed) _____

Were you raised by anyone other than your parents? Briefly explain

Older Siblings: _____ Younger Siblings: _____
brothers ____ sisters ____ brothers ____ sisters ____

MARRIAGE INFORMATION

Marital status _____ First Name of spouse _____

Your spouse's age ____ Occupation _____

Date of marriage _____ Your ages when married: Husband ____ Wife ____

Any previous marriages? _____ Husband ____ Wife ____

Give information about any previous marriages: _____

How long did you know your spouse before marriage? _____

Length of steady dating with spouse _____ Length of engagement _____

Have you ever been separated? _____ When? _____ How long? _____

Have either of you ever filed for divorce? _____ When? _____ Who? _____

INFORMATION ABOUT CHILDREN

Name	Age	Sex	Living (Yes / No)	Marital Status
_____	____	____	_____	_____
_____	____	____	_____	_____
_____	____	____	_____	_____
_____	____	____	_____	_____

Have you had any miscarriages/abortions Yes/No Which? _____

PARENTS' RELATIONSHIP

Parents presently married/ divorced? _____ Alive or deceased? _____

Any step-parents _____ Adoption? _____

PERSONAL HISTORY QUESTIONNAIRE

Was there a sense of security and harmony in your home growing up?

How was authority exercised in your home? Which parent was in charge and how did he/she operate?

How was affection shown between your parents and towards you?

Are you aware of any adultery or incest in your family or that of your grandparents?

Have any of your parents, grandparents, or great-grandparents ever been involved in any occultic, cultic or non-Christian religious practices?

Were your parents Christians and did they profess and live their Christianity?

FAMILY HEALTH

Any addictions in your family (e.g. alcohol, drugs, gambling, eating disorders)?

Any history of mental or emotional illness _____

Any history of the following

Tuberculosis

Heart disease

Diabetes

Cancer

Ulcers

Glandular problems

Epilepsy

Other Major Conditions _____

Describe your family's concern for :

Diet _____ Exercise _____ Rest _____

PERSONAL HISTORY QUESTIONNAIRE

HEALTH INFORMATION

Physical

Rate your health Very good Good Average Declining Poor

Your approximate weight _____ lbs. Changes recently: Lost _____ Gain _____

Approximately how many hours of sleep do you get a night _____

Do you nap during the day _____

Do you take time for regular periods of rest, relaxation, and exercise _____

List all important present and past illness or injuries or handicaps _____

Date of last medical examination _____ Report _____

Are you presently taking medication Yes No List meds _____

Have you used drugs for other than medical purposes Yes No

List _____

Describe your eating habits (i.e. are you a junk food or health food addict, do you eat regularly or sporadically, is your diet balanced _____

Do you have addictions or cravings you find difficult to control (sweets, drugs, alcohol, food, sex)

MENTAL / EMOTIONAL

Have you ever had a severe emotional upset Yes No,

Explain _____

Have you ever had psychotherapy, counseling or prayer ministry Yes No

If Yes, which _____ When _____

What was the outcome _____

Have you seriously desired to be someone else _____

Or to escape life and not exist _____

Or to live in another time/place _____

Have you feared that you might go insane Yes No _____

PERSONAL HISTORY QUESTIONNAIRE

How much time do you spend a week reading? What do you read (newspaper, magazines, books)

How much do you listen to music What kind(s)

Check and explain presence of any of the following:

Shame	Anger	Unworthiness
Guilt	Bitterness	Inadequacy
Deception (lies)	Resentment	Insecurity
Fear	Depression	Inferiority
Worry	Hatred Self	Blasphemous Thoughts
Anxiety	Hatred	Pride
Panic	Fantasy	Arrogance
Rejection	Pornography	Rebellion
Abandonment	Adultery	Doubt
Neglect	Lust	Skepticism
Self-Rejection	Death Thoughts	Loneliness
Control	Suicide	Compulsiveness
Performance	Death Wish	Addictions
Unwantedness	Abuse	Confusion
Other		

Is there anyone you can tell exactly how you feel about yourself, life and other people

Are you emotionally honest with God Yes No Explain _____

Have you ever been arrested Yes No Why? _____

PERSONAL HISTORY QUESTIONNAIRE

RELIGIOUS BACKGROUND

Denominational preference _____

What church do you presently attend _____

Who is the pastor _____

Church attendance (times per month): 1 2 3 4 5 6 7 8 9 10+ _____

Church attended in childhood _____ Baptized Yes No

Religious background of spouse _____

Do you consider yourself a religious person Yes No Uncertain

Do you pray to God Yes No Uncertain

If you were to die right now, are you certain you would go to heaven Yes No

What is the basis for answering the preceding question as you did _____

Are you saved Yes No Not sure what you mean

Are you plagued with doubts concerning your salvation Yes No

How much do you read the Bible Never Occasionally Often

Do you pray regularly Yes No

Do you find praying difficult _____ Explain _____

Do you have a regular personal time with God Yes No

Do you have regular family devotions Yes No

When attending Christian meetings are you plagued with foul thoughts, jealousies or other mental harassment? Explain _____

Explain recent changes in your Christian experience, if any _____

Have you ever been involved either in reading or in practice with metaphysics?

Explain _____

Have you ever taken a class or read books on parapsychology?

Have you ever heard voices in your mind?

PERSONAL HISTORY QUESTIONNAIRE

Describe any other experiences you may have had that would be considered out of the ordinary

Have you had any experience in the following cults and religions? Check all that apply.

Explain: _____

Occult

Astral Projection
Ouija Board
Table Lifting
Speaking in Trance
Automatic Writing
Visionary Dreams
Telepathy
Clairvoyance
Fortune Telling
Tarot Cards
Healing Magnetism
Palm reading
Blood Pacts
Rod and Pendulum
(Dowsing)
Amateur Hypnosis
Magic (Black or White)

Cults

Christian Science
Unity
Scientology
The Local Church
The Way International
Unification Church
Unitarianism
Jehovah's Witness
Children of God
Mormonism
Freemasonry
New Age
Worldwide church of God
(Armstrongism)
Non-Christian Religion

Religions

Zen Buddhism
Hare Krishna
Baha'ism
Rosicrucianism
Science of Mind
Silva Mind Control
Echokantar
EST
Transcendental Meditation
Islam
Black Muslim
Hinduism
Yoga
Theosophy

BARRIERS TO FREEDOM

Deception vs Truth (Study 1 John 1:4-2:2)

Are you aware that you have believed any lies concerning life, yourself, others, etc.? Explain

Are you aware of any self-deceptions such as

Denial of reality
Fantasy escape
Attempt to retreat to earlier stage of life
Venting feelings on people weaker than those who hurt you.

Attempts to identify self as someone else
Emotional Passivity

PERSONAL HISTORY QUESTIONNAIRE

Are you given to defending yourself by:

Covering up your weaknesses by overdoing strengths

Blaming others for your own problems

Rationalization to justify yourself

Bitterness vs Forgiveness (study Ephesians 4:31)

Ask God to bring to mind every relationship where there are feelings of resentment or bitterness

And list them. Include God

Ask God to reveal to you every person you need forgiveness from and list them.

Rebellion vs Submission (study Romans 13:1-5)

Examine yourself with regards to any rebelliousness in relation to each of the following.

Notice that each passage promises a blessing for a submissive response.

1. Civil government (1 Timothy 2:1-3; 1 Peter 2:13-16)
2. Parents (Ephesians 6:1-3)
3. Husband (1 Peter 3:1-3)
4. Employer (1 Peter 2:18-21)
5. Church leaders (Hebrews 13:17)

Record any thoughts that come to mind in this regard _____

Bondage vs Freedom (study Galatians 5:1)

Examine yourself in the light of the following passages:

Romans 1:24-31

1 Corinthians 6:9-11

Galatians 5:19-21

Revelations 21:8, 22:15

Record any thoughts that come to mind in this regard _____

PERSONAL HISTORY QUESTIONNAIRE

Four Important Questions

In your own words describe and evaluate your problems?

What have you done about it?

What are your expectations in coming to us for ministry?

Is there any other information we should know?
