

**ALL PEOPLES CHURCH - PRAYER MINISTRY APPLICATION FORM**

727 Old Graves Mill Road, Lynchburg, VA 24502 | www.allpeopleschurch.us/prayer

The purpose of the prayer ministry at All Peoples Church is to provide a safe space for you to connect with God and to allow Him to provide healing and restoration. The prayer ministry team of All Peoples Church is an extension of the pastoral ministry and is submitted to the pastoral leadership of All Peoples Church. This prayer ministry does not provide counseling.

Please fill out **all** applicable sections of this form. You may drop off your printed application in the secure drop box located on the wall next to the church office door. Please allow 90-120 minutes for your prayer session. If needed, a follow up prayer session may be scheduled with your prayer ministers immediately following your session.

**Please sign and date the All People’s Church Informed Consent and Waiver of Liability form located on the last page of this application.**

**PERSONAL INFORMATION**

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

Full Address: \_\_\_\_\_

Email: \_\_\_\_\_ Phone #: \_\_\_\_\_

How did you hear about our prayer ministry? \_\_\_\_\_

Please check all that apply for your availability:

<b>Monday</b>	<input type="checkbox"/> Morning	<input type="checkbox"/> Afternoon	<input type="checkbox"/> Evening
<b>Tuesday</b>	<input type="checkbox"/> Morning	<input type="checkbox"/> Afternoon	<input type="checkbox"/> Evening
<b>Wednesday</b>	<input type="checkbox"/> Morning	<input type="checkbox"/> Afternoon	<input type="checkbox"/> Evening
<b>Thursday</b>	<input type="checkbox"/> Morning	<input type="checkbox"/> Afternoon	<input type="checkbox"/> Evening
<b>Friday</b>	<input type="checkbox"/> Morning	<input type="checkbox"/> Afternoon	<input type="checkbox"/> Evening
<b>Saturday</b>	<input type="checkbox"/> Morning	<input type="checkbox"/> Afternoon	<input type="checkbox"/> Evening
<b>Sunday</b>	<input type="checkbox"/> Morning	<input type="checkbox"/> Afternoon	<input type="checkbox"/> Evening

Are you currently, or have you ever been under the care of a psychiatrist, psychologist, therapist, or licensed counselor? *(If yes, please explain)*

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

The APC prayer ministry team has both male and female prayer ministers available for ministry. Would you object to having a member of the opposite sex on the team ministering to you? Yes \_\_\_ No \_\_\_ If yes, are you open to married couple prayer ministers? Yes \_\_\_ No \_\_\_

**MARITAL STATUS**

Status: Single / Married / Separated / Divorced / Remarried

Spouse's Name: \_\_\_\_\_

Describe your marriage: \_\_\_\_\_ Unhappy \_\_\_\_\_ Average \_\_\_\_\_ Happy \_\_\_\_\_ Very Happy

Is this your first marriage? \_\_\_\_\_ Yes \_\_\_\_\_ No

Do you have children? \_\_\_\_\_ Yes \_\_\_\_\_ No If yes, # of children \_\_\_\_\_

**PARENTS BACKGROUND**

Status: Married / Separated / Divorced / Remarried

Describe your parent's marriage: \_\_\_\_\_ Unhappy \_\_\_\_\_ Average \_\_\_\_\_ Happy \_\_\_\_\_ Very Happy

Father: Living \_\_\_\_\_ Deceased \_\_\_\_\_ Mother: Living \_\_\_\_\_ Deceased \_\_\_\_\_

Give three words that characterize your relationship with your father.

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_

Give three words that characterize your relationship with your mother.

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_

**SPIRITUAL/RELIGIOUS BACKGROUND**

How would you rate your commitment to Jesus Christ as Lord and Savior?

*(Detached)* \_\_\_\_\_ 1 \_\_\_\_\_ 2 \_\_\_\_\_ 3 \_\_\_\_\_ 4 \_\_\_\_\_ 5 \_\_\_\_\_ 6 *(Committed)*

Describe your present relationship with the Lord: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

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**DESCRIBE YOUR CURRENT ISSUE**

1. Describe the issue that you seek prayer ministry for at this time:

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2. How does this issue affect you?

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3. When did this issue begin?

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4. On a scale of 1-10, how painful is this issue currently (10 being very painful)? \_\_\_\_\_

**NEGATIVE INFLUENCES & FAMILY PATTERNS**

Please review the topics below and check any that pertain to you. Any topics you strongly relate to, please mark them with an **S**.

Abandonment	Depression/hopelessness	Pornography
Abuse (emotional/mental)	Failure	Poverty
Abuse (physical)	Fears	Pride
Abuse (spiritual)	Freemasonry	Rebellion
Abuse (sexual)	Gender identity issues	Rejection
Abuse (verbal)	Grief	Sexual sin/perversion
Addiction	Hatred	Shame
Anger/rage	Idolatry/false religion	Sleep Issues
Anxiety	Loss/Loneliness	Suicidal thoughts/attempts
Bitterness/criticism	Mental health issues	Torment/confusion
Bound emotions	Neglect	Trauma
Chronic illness/infirmity	New Age involvement	Unbelief
Control issues	Occult (witchcraft)	Unworthiness
Condemnation	Oppression	Victimization
Cult involvement	Orphan lifestyle	Violence
Death	Performance-oriented	
Deception/lying	Perfectionism	

1. Indicate any past/present labels or unkind words spoken to you.

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2. Indicate any past /present labels or unkind words you've spoken to yourself

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3. Please share anything else that you feel would help your prayer minister better understand you and your current issue.

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**ALL PEOPLES CHURCH PRAYER MINISTRY INFORMED CONSENT AND  
WAIVER OF LIABILITY**

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I, **(please print first and last name)** \_\_\_\_\_.

I understand that my participation in healing prayer sessions is completely voluntary and that I may stop participation at any time.

I understand personal files are protected as 'CONFIDENTIAL'. As such, identifying specific details of my file may not be disclosed to others without my written consent except as specified by Virginia law: 1) as required by subpoena or court order in legal proceedings, 2) when not to do so would potentially result in physical harm to myself or others, 3) to report any disclosure/suspicion of child/elderly neglect or abuse (physical or sexual). Also, I further understand that All Peoples Church, Inc. offers a prayer ministry center and not a counseling or therapeutic center. If I have any questions concerning my prayer ministers' training, experience, or qualifications, I have the right to question them and/or the leadership of All Peoples Church.

I hereby waive any claim that I have or may have in the future against the prayer ministers and All Peoples Church for any negligence of any All People's Church employee, pastor, leader, agent, or officer that contributes in whole or in part to any physical or emotional injury that I suffer on All Peoples Church premises or in relation to attending any All Peoples Church Prayer ministry session, event or training.

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PRINT AND SIGNATURE OF PRAYER GUEST

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DATE