

ALL PEOPLES CHURCH - PRAYER MINISTRY

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

PRAYER MINISTRY APPLICATION FORM

The purpose of the Prayer Ministry at All Peoples Church is to provide an open invitation for God to heal physically, emotionally, and spiritually; as easily and effectively as possible. All Peoples Prayer Teams are an extension of the pastoral ministry, and as such, are submitted to the pastoral authority of All Peoples Church. To best serve you, the ministry team may consult with the leadership of our church concerning our ministry to you. Please note—No counseling or advice will be provided by this ministry.

Please fill out all applicable sections of this Form several days before your scheduled ministry. Please allow 90 minutes for the prayer time with your prayer ministers. If you should need additional ministry, additional prayer times are possible as well as a referral to other sources of help.

*Please sign and date the last page of this form **and** the attached All People’s Prayer Commitment and Informed Consent form located on the last page of this application. *

PERSONAL INFORMATION

Name: _____

Full Address: _____

Email: _____ Phone #: _____

DOB: _____ Age: _____ Occupation: _____

Your Personal Purpose in Life: _____

Marital Status: _____ Presently living with: Parents / Spouse / Alone / Other _____

MARITAL BACKGROUND

Spouse’s Name: _____ Age: _____ Date of Marriage: _____

Please describe your marriage at this time: _____

Is this your first marriage? _____ Yes _____ No, (please explain) _____

CHILDREN (please give the following information about each of your children.)

| Name | Age | Sex | From Which Marriage? | Self-Supporting/Married/Still Alive/ Age at Cause of Death? |
|------|-----|-----|----------------------|--|
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PARENTS BACKGROUND

Parents' Status: Married / Separated / Divorced / Remarried? Father: _____ Mother: _____

Rate your parent's marriage: _____ Unhappy _____ Average _____ Happy _____ Very Happy

If parents are/were separated/divorced, how old were you at the time of the separation/divorce? _____

Father remarried when you were age _____ Mother remarried when you were age _____

You lived: _____ Father _____ Mother _____ Step Parent _____ Foster Parent _____ Other _____

Father deceased? _____ Yes _____ No How old were you at the time of death? _____

Mother Deceased? _____ Yes _____ No How old you at the time of death? _____

On a scale of 1-10, rate how much each parent loved you. Give examples of how they showed their love.

Father: _____

Mother: _____

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. _____

PLEASE FILL IN THE BLANK

I often felt my mother:

I often felt my father:

SPIRITUAL/RELIGIOUS BACKGROUND

Explain your commitment to Jesus Christ as Lord and Savior:

_____ 1 (*Detached*) _____ 2 _____ 3 _____ 4 _____ 5 _____ 6 (*Committed*)

Please explain:

Describe your present relationship with the Lord: _____

Please list all previous church affiliations: _____

Do you know of anyone in your family line who either was involved in non-Christian teaching or practiced the occult? (This could include: New age, metaphysics, cults, spiritualism, psychic power, tarot cards, Satanism, witchcraft, Free Masonry, etc.) If so, please identify:

Relationship: _____ Involvement: _____
Relationship: _____ Involvement: _____
Relationship: _____ Involvement: _____

Have you ever been involved in dabbling with or practicing the occult: _____ Ouija Bords _____ tarot cards
_____ horoscopes _____ witchcraft _____ seances/mediums _____ psychic power _____ astral travel
_____ new age | other: _____

To your knowledge, have you ever been socially or sexually involved with anyone who practiced witchcraft or Satanism? _____ Yes _____ No If yes, please explain: _____

Describe any significant fearful experiences with "evil": _____

DESCRIBE YOUR CURRENT ISSUE

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

2. How has your life been affected by this issue?

3. On a scale of 1-10, how painful is this issue right now (10 being very painful)? _____

4. How are others that you love being affected because of this issue?

5. Is your relationship with God being affected by this issue?

6. When did this issue begin? Is it an ongoing issue?

7. Do any childhood hurts or situations seem related to the current issue? Are there any recent similarities with painful situations in the more recent past? Please Describe:

8. Do you see any ways you have contributed to making the issue worse or longer-lasting? Describe:

9. Do you see any patterns in your family line related to your issue? Describe:

NEGATIVE INFLUENCES & FAMILY PATTERNS

Please review the topics below. Write next to the topic name an 'S' if it applies to you (self) and an 'F' if it applies to your family line, such as your parents, grandparents, great grandparents, uncles, aunts, etc. For each pattern that you believe **strongly relates** directly to your current issue please **circle the topic**.

| | | |
|---------------------------|-------------------------|----------------------------|
| 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 | Suicidal thoughts/attempts |
| Bitterness/criticalness | 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 | |

More Comments:

SPOKEN INFLUENCES

1. Indicate any past/present or labels or unkind words spoken to you or about you. (e.g. You're such a failure, ugly, stupid, etc.)

2. Indicate any labels or unkind words you've spoken to yourself (e.g. I'll never be happy, successful, married, etc.)

3. Indicate any vows/judgements you made about others (e.g. People can't be trusted, I have to protect myself from others)

4. Are you or have you ever been in a close/controlling relationship or a sexual relationship outside of marriage? Describe: _____

OTHER FAMILY PATTERNS

*What are some **common negative emotions** in your family line that may or may not be your life also? (example – shame, guilt, fear, anxiety, rejection, unforgiveness, bitterness, etc.)*

FINAL COMMENTS

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

EXPECTATIONS

I understand it is expected that I have a sincere desire to overcome whatever problems are hindering me, and I am expected to cooperate fully with my prayer team and the Holy Spirit to facilitate receiving God's help. My prayer team may ask me to prayer, or do some outside 'homework' in conjuncture with my prayer ministry session.

REFERRALS

If my prayer team is not equipped or able to minister to my particular need or if I need longer-term ministry, they may, in conjunction with the Pastors and leaders of All Peoples Church refer me to appropriate help.

WAIVER OF LIABILITY

I understand that I will be meeting with a prayer team that will be able to listen, support, encourage, prayer, and minister to me to help me overcome my problem(s) and grow in my Christian life. I accept that they may not be a licensed or professional pastor or counselor.

By my signature below, I acknowledge that I have read and understood the Waiver of Liability and Prayer Ministry Guest's Rights, Commitment, and Informed Consent and that I accepted the stated conditions.

PRINT AND SIGNATURE OF PRAYER GUEST

DATE

ALL PEOPLES PRAYER INFORMED CONSENT

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PRAYER MINISTRY GUEST'S RIGHTS, COMMITMENT, AND INFORMED CONSENT

I, (First and Last Name) _____, understand that it is expected that I sincerely desire to overcome the issues that are hindering me and that I will cooperate fully with my prayer ministers and the Holy Spirit in order to help facilitate receiving God's healing. My prayer ministers may ask me to pray or do some homework to support my healing. They also may ask me to be accountable to them for some specific behaviors. I understand that my participation in healing prayer sessions is completely voluntary and that I may stop participation at any time.

I also 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.

I also understand that this ministry uses the services of volunteer prayer ministers who have completed various healing ministry training programs and may or may not be members of a particular church or religious organization. As such, they are required to consult periodically with the leadership of All Peoples Church or other staff. I give my permission for my prayer ministers to discuss my prayer needs with the appropriate leadership and staff as necessary. If it is necessary for me to receive prayer for four or more appointments, I give the prayer ministers my permission to evaluate my needs for future ministry. Names and specific identifying characteristics will not be routinely discussed or disclosed except where referral to other care/treatment is indicated. 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 also understand that this ministry has a limited number of prayer ministers that occasionally must cancel for extenuating circumstances. In the event that my prayer minister must cancel without advance notice, I agree to either reschedule my appointment or take the next available prayer ministry time.

I also understand that I am protected by law from any sexual advances or harassment while undergoing ministry. If at any time I feel offended by anything my prayer minister asks, says, or does, I acknowledge that it is my responsibility to tell him and/or her. If the behavior does not stop immediately, and if the circumstances of the offensive words/actions are such that I am uncomfortable confronting the prayer ministers directly, I also acknowledge that it is my responsibility to report it immediately to the leadership of All Peoples Church.

I understand that because All Peoples Church offers a prayer ministry and not a counseling or therapeutic center they do not routinely keep detailed records and will not provide information for lawyers, or for disability claims, or for similar matters.

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 Peoples 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.

For Online Appointments: I understand that I will be using a third-party video conferencing program to communicate during my online prayer appointment. All Peoples Church – Prayer Ministry will not record these ministry appointments and will work to keep my time of ministry as secure as possible. With any online platform, there are certain security risks. In the rare case of a security breach, I will not hold All Peoples Church – Prayer Ministry liable for any security issues pertaining to my online prayer appointment.

PRINT AND SIGNATURE OF PRAYER GUEST

DATE