



Freedom Session Request

Participant name _____

Sex _____ Age _____

Street address _____ Apt. # _____

City _____ State _____ Zip _____

Cell Phone _____ Email _____

Marital Status _____ Home Church _____

Do you prefer an in-person session or a phone session? _____

Are you able to do an in-person session on a Wed morning from 9:30-11:30 am or a Thurs evening from 5:30-7:30 pm?
(please specify) _____

**Due to the Covid-19 epidemic, would you prefer our team to wear a mask or shield for an in-person session? YES
NO**

If yes, do you have a preference? MASK SHIELD NO PREFERENCE

Did you watch the "What is Freedom?" videos at www.onecity.church/freedom? YES NO

Have you previously had a Freedom Session? YES NO If yes, when? _____

Are you able to fast and/or pray 1 week prior to your session? YES NO

Can you climb stairs for your session? YES NO

Please ask Holy Spirit to guide you as you answer the following questions:

| | |
|---|--|
| Which of the following best describes the sense of urgency you feel? <i>(Please check only one)</i> | |
| <input type="checkbox"/> I <i>regularly</i> fear what I may do to myself or others | <input type="checkbox"/> I would like attention soon |
| <input type="checkbox"/> <i>Sometimes</i> I fear what I may do to myself or others | <input type="checkbox"/> I'm interested in help whenever it is available |
| <input type="checkbox"/> I am struggling a <i>great deal</i> ; please help soon | <input type="checkbox"/> I'm interested in my own growth, but I am in no hurry |

Who referred you for an individual Freedom Session? _____

Why are you seeking ministry for yourself? _____



What are your expectations and desires for receiving ministry?

Describe any deliverance you have been through: _____

Administrative Use Only:
Date submitted: _____ Appointment Date/Time _____ Team: _____



Counseling/Prayer Ministry Agreement

Name: _____ Phone: _____

Address: _____

City, State, Zip: _____

Consideration for being permitted to participate in voluntary pastoral and biblical counseling, herein referred to as “counseling,” and prayer ministry, herein referred to as “prayer ministry,” the undersigned,

_____, herein referred to as “participant,” agrees as follows:

1. This is a church-based ministry of One City Church providing counseling and/or prayer ministry to individual and group settings. Our counseling/prayer ministry is done by pastoral staff and lay-ministers, herein referred to as “ministers.” Most of these individuals are not licensed as professional counselors, social workers, or psychologists, however, those who are will only function in a pastoral role performing religious, biblical counseling or prayer ministry and not secular or psychological counseling. If it becomes apparent that secular or psychological counseling may better address the participant’s needs, the minister will immediately initiate a referral to a licensed professional minister, social worker, or psychologist.
2. Under all circumstances, sexual contact between a participant and minister is prohibited. If any minister suggests or attempts sexual advances, the participant shall terminate the session immediately and report the incident to the Director of Freedom Ministries, Lead Pastor or any other elder not involved.
3. Under normal circumstances, your minister will use their good faith efforts to keep your discussions in confidence. However, you should be aware there are some situations in which your minister may be required by law to report information to the proper authorities without your permission or knowledge. These situations include but may not be limited to: a participant’s intent of harm to self or others, involvement in a felony, suicidal intentions, and/or reasonable evidence of child or elder abuse/neglect. Your minister may also disclose information in response to a subpoena issued by a court of law. Additionally, if you occupy a leadership or ministry position, your minister or the Freedom Ministries Director may also disclose information to the person in authority over you, in the event he or she deems it relevant to your fitness or ability to fulfill your position.
4. Officially recognized church staff and lay-personnel may also have limited access to your pastoral file. Any other person seeking access to your pastoral file may do so only with your written permission. However, One City Church cannot guarantee complete confidentiality with regard to the information received from you.
5. One City Church requires that parent(s) must be actively involved in any counseling and/or prayer ministry that is extended to a minor child as determined by the minister. At the direction of the minister, parent(s) will be required to make themselves accountable for active participation in counseling and/or prayer ministry offered by One City Church.
6. Participants with any concerns or questions about this agreement agree to raise them with their minister at the earliest possible time.
7. This agreement, herein referred to as the “ministry agreement,” will govern all relations involved during the term of the counseling process and prayer ministry sessions. The Voluntary Release, Assumption of Risk, and Indemnity Agreement will be incorporated as part of this ministry agreement. It is agreed that any disputes or modifications to this ministry agreement will be determined directly between the individuals involved. If this ministry agreement is not satisfactory, then is is further agreed that disputes and disagreements will be taken to the One City Church Lead Pastor or Council of Elders for mediation. In the event that a satisfactory resolution is not achieved, then it is further agreed that a mutually acceptable third-party mediator will be utilized. If the mediation is unsuccessful, then the dispute shall be submitted to Christian arbitration. All expenses incurred will be the responsibility of the party bringing the dispute.

I have read the above ministry agreement, understand it, and agree to the terms herein written.

Signature of Participant _____ Date _____



Voluntary Release, Assumption of Risk, and Indemnity Agreement

Name: _____ Phone: _____
Address: _____
City, State, Zip: _____

In consideration for being permitted to participate in voluntary pastoral and biblical counseling, herein referred to as “counseling,” and prayer ministry, herein referred to as the “prayer ministry,” and the undersigned, _____, herein referred to as the “releasor,” agrees as follows,

Release, waiver, discharge, and covenant not to sue. Releasor and releasor’s personal representatives, assigns, insurer, heirs, executors, administrators, spouse, and next of kin, hereby releases, waives, discharges, and covenants not to sue One City Church of Beaumont, Texas, and its directors, officers, elders, pastors, deacons, ministry team members, employees, agents, and volunteers, as well as its successors, affiliates, and subsidiaries, all herein referred to as the “releasees,” from any and all liability to releasor, and to releasor’s personal representatives, assigns, insurers, heirs, executors, administrators, spouses, and next of kin for any and all loss, damage, or cost on account of injury to the person or property or resulting in the death of releasor, whether caused by the negligence of releasees or otherwise while releasor is participating in the prayer ministry and any other activities in connection with the prayer ministry.

Assumption of Risk. Releasor understands, is aware of, and assumes all risks inherent in participating in counseling and the prayer ministry. These risks include, but are not limited to, physical and emotional responses and reactions as a result of counseling and this prayer ministry.

Indemnity. Releasor agrees to indemnify releasees from any liability, loss, damage, or cost releasees may incur due to the participation by releasor in counseling and the prayer ministry whether caused by the negligence of releasees or otherwise. Releasor assumes full responsibility for and risk of bodily injury, death, or property damage due to negligence of releasees or otherwise while participating in counseling and the prayer ministry.

Releasor expressly agrees that this Voluntary Release, Assumption of Risk, and Indemnity Agreement, herein referred to as “agreement,” is intended to be as broad and inclusive as permitted by the laws of the State of Texas and that, if any portion of this agreement is held invalid, it is agreed that a balance, notwithstanding, continue in full legal force and effect. This agreement, along with the ministry agreement contains the entire agreement between the parties in regard to counseling and the prayer ministry.

Releasor represents that:

- I have carefully read this agreement. I understand, and it is a release of all claims, including the negligence of releasees. I have been given an opportunity to review this agreement with an attorney of my choosing.
- I understand that I assumes all risks inherent in counseling and the prayer ministry set forth is this agreement.
- I understand that I am indemnifying the releasees.
- I voluntary sign my name evidencing my understanding and acceptance of the provisions of this agreement.

Signature of Participant _____ Date _____