

Request for HMI Church Sozo Ministry

This application is the first step in obtaining an appointment for Sozo prayer ministry and must be completed by the person desiring ministry. Please sign the release of liability form on the back of this application. Ministry appointments cannot be granted to anyone who refuses to sign this form.

If approved for ministry, your name will be added to a waiting list. Your information will be kept confidential. A copy of your application will be given to the leader of your assigned HMI Sozo team for the purposes of prayer and preparation for your session. Session durations vary, but are usually between 1 - 3 hours.

The HMI Sozo ministry does not provide crisis ministry or family or personal interventions. All ministry is done at HMI Church. We do not do home visits. HMI reserves the right to refuse to provide Sozo ministry if deemed inappropriate or likely ineffectual.

This ministry depends upon trained and qualified volunteers and we must coordinate appointments around their availability. Please indicate the best times of the day and week that you are available for ministry and we will do our best to serve you accordingly. *Donations to support the ministry are highly appreciated.*

Failure to keep your appointment will result in loss of priority in scheduling any new appointments. If for any reason you will not be able to keep your appointment, please notify us immediately at sozoministry@hmichurch.com or call your assigned Sozo minister to let us know you must cancel and reschedule.

NAME: _____ DATE: _____ AGE: (if under 18 yrs.) _____

ADDRESS (no PO Box #'s please) _____ GENDER: M F

CITY: _____ STATE: _____ ZIP: _____

Email: _____ Contact Phone: _____

Is this your first Sozo? Yes No If "No", How many? ____ Are you a Charis Bible College Student/Grad? Yes No

My need for ministry concerns: Deliverance Physical Healing Emotional Issues Inner Healing
Other (Please explain) _____

Are you currently receiving any type of medical care for these issues and/or are you taking any mood-altering medication (e.g. anti-anxiety or antidepressant)? Yes No Describe _____

Are you currently grieving the loss of a significant relationship or job? Yes No

How did you learn about the Sozo ministry at HMI Church? _____

Date and location where you accepted Jesus as Savior _____

Were you water baptized AFTER accepting Jesus? Yes No

Have you been baptized in the Holy Spirit? Yes No Not Sure

I am now attending _____ as my church home.

Please note the days of the week and times of day you are available for ministry:

_____.

PLEASE COMPLETE THE REVERSE SIDE OF THIS FORM. **

Release of Liability

(This form must be signed before a ministry appointment can be scheduled)

I, (name) _____ acknowledge that team members from the Sozo ministry of HMI Church have agreed to minister and pray for me voluntarily. I understand that this session is not professional counseling and that none of the team members serve as licensed counselors. I understand that these team members are doing, to the best of their ability, what they can to help me towards more freedom in my life and relationship to God. I further state that I have sought this assistance voluntarily of my own initiative and that I understand I am under no obligation to accept or reject any of the advice or help that I might receive from the team members of this ministry.

I understand that Heartbeat Ministries International (HMI) is a nonprofit Colorado corporation that makes no charge for its services.*

I understand that if I receive ministry from the HMI Sozo Ministry, the team is committed to respect the disclosed information, but not to complete confidentiality. The information, as needed, may be shared with other leaders of the Sozo ministry so as to further my total healing process. This may include recommendations for future meetings with spiritual mentors in the church to suggest appropriate guidelines for my personal and spiritual growth. I also understand that, after anonymization, information supplied by me may be used for team training and ministry process improvement purposes. The HMI Sozo Ministry is subject to Colorado mandatory reporting laws for children.

I agree to hold HMI Church and its leadership, as well as all Sozo team members free from any and all liability, loss or damage of any kind that may arise as a result of this ministry.

I have read this disclaimer and Liability Release form, fully understand and agree with it and have executed it as my free and voluntary act.

Signature

Date

Signature of parent/guardian if under age 18

Date

*DONATION: We suggest a donation of at least \$40. We have discovered that people tend to value their experience more if they have sown into their own healing. However, our team members offer biblical spiritual ministry to anyone regardless of their ability to donate. There is no fixed charge for our services. Since this ministry would not exist apart from voluntary donations, we ask that you consider making a donation to HMI Church Sozo to help us share this same help with others. Your donation will be seeded back into the Sozo ministry to meet basic administrative expenses and team training. Make checks to "HMI Church" or you can donate cash or use a credit card using an HMI offering envelope. Please make a note designating your gift for "HMI Sozo". If you would like a tax deductible receipt, we will mail you one upon request. Thank you!

WHERE DO I SEND MY REQUEST? There are several options to submit this form: 1) complete and e-mail or snail-mail it to the address below or, 2) drop into the Sozo box in the church lobby or, 3) put it in an envelope and hand to any HMI pastor or Sozo team member.

Heartbeat Ministries International
ATTN: Sozo Ministry
3958 Academy Blvd N, Suite #115
Colorado Springs, CO 80917
(sozoministry@hmic church.com)