

# SOZO MINISTRY APPLICATION

Lake Tahoe Christian Fellowship Transformation Center

Name \_\_\_\_\_ Date of Application: \_\_\_\_\_

Mailing Address \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_

Phone \_\_\_\_\_ Cell \_\_\_\_\_ Email \_\_\_\_\_

Gender: Male \_\_\_\_ Female \_\_\_\_ Age \_\_\_\_\_

Church Attending: \_\_\_\_\_

Why would you like to receive a Sozo? \_\_\_\_\_

Have you received ministry from LTCF's Sozo Team in the past? \_\_\_\_ Approx. date of ministry? \_\_\_\_

Have you received inner healing from another ministry in the past? \_\_\_\_ Approx. date of ministry? \_\_\_\_

Who referred you to the Sozo ministry? \_\_\_\_\_

Do you attend a cell group or a home group? \_\_\_\_ **Yes** \_\_\_\_ **No**

If not, we strongly recommend you find one. We recommend that you share with someone you trust what happened during the Sozo so that you will have someone to pray with and hold you accountable (this person should not be who you consider your "best friend").

Will you be able to fast or pray one week before your Sozo? \_\_\_\_ **Yes** \_\_\_\_ **No**

*Ask the Lord what He wants you to fast. It can be fasting one meal a day or fasting watching TV.*

**For the value of the time spent ministering to you, there is a suggested donation of \$75.00. You may send the donation, payable to "LTCF, Memo: Sozo Ministry", when you return this application and the signed Liability Release form to Lake Tahoe Christian Fellowship, Attn: Sozo Ministry, 3580 Blackwood Road, South Lake Tahoe, California 96150.**

As soon as your paperwork is received, we will contact you to schedule an appointment. Thank you.

## OFFICE USE ONLY:

Received Request from \_\_\_\_\_ Appointment Date: \_\_\_\_\_

Paid: \_\_\_\_\_ Appointment Time \_\_\_\_\_

## ***LIABILITY RELEASE***

### **Lake Tahoe Christian Fellowship Transformation Ministries**

I (name) \_\_\_\_\_ acknowledge that team members from Transformation Ministries of Lake Tahoe Christian Fellowship have voluntarily agreed to pray for me. I understand that this session is not a professional counseling meeting and that none of the team members are licensed counselors. I understand that these team members are, to the best of their ability, doing what they can to help me achieve more freedom in my life.

I understand that Lake Tahoe Christian Fellowship is a nonprofit California Corporation that makes no charge for its services. I further state that I have voluntarily sought assistance of my own initiative and that 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.

Our team members offer biblical spiritual services to anyone who desires them regardless of ability to pay. Although there is no charge for our services, all efforts to build this ministry support and train our team members are paid directly from the donations of those receiving these services. We therefore have a suggested donation of \$75.00 or more per visit. Your contributions to this ministry are greatly appreciated because they support our further development. Please make donations payable to LTCF. All donations are tax deductible. A tax deductible receipt will be provided for you. Thank you!

I understand that if I receive ministry from LTCF Transformation Ministries, 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 Transformation Ministries so as to further your total healing process. This may include future meetings with spiritual mentors in the church to set appropriate boundaries for your personal and spiritual growth.

I agree to hold Lake Tahoe Christian Fellowship and its team members free from any and all liability, loss or damage of any kind that may arise as a result of assistance which I have received or from my involvement with Lake Tahoe Christian Fellowship.

***Any donations should be payable to Lake Tahoe Christian Fellowship.***

***I have read this disclaimer and release of liability and understand and agree with it and have executed it as my free and voluntary act.***

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*