

**CHILDREN:**

Name \_\_\_\_\_ M \_\_\_\_\_ F \_\_\_\_\_ Age \_\_\_\_\_

Name \_\_\_\_\_ M \_\_\_\_\_ F \_\_\_\_\_ Age \_\_\_\_\_

Name \_\_\_\_\_ M \_\_\_\_\_ F \_\_\_\_\_ Age \_\_\_\_\_

Name \_\_\_\_\_ M \_\_\_\_\_ F \_\_\_\_\_ Age \_\_\_\_\_

**BRIEFLY ANSWER THE FOLLOWING QUESTIONS:**

1. What brings you here at this time?
2. What have you done about it?
3. What are your expectations in coming here for guidance?
4. What other information should we know?

**CONFIDENTIAL PERSONAL DATA INVENTORY**

*All information completed on this form and shared personally may be reviewed by the Counseling Staff of Calvary Chapel Salt Lake. Any acts or statements that we are legally required to report will be reported to the proper authorities as required by State and Federal Laws.*

Signature of person(s) seeking Biblical Guidance (or guardian if minor)

X \_\_\_\_\_ X \_\_\_\_\_

**AGREEMENT & COVENANT**

*In order to offer free Biblical Guidance, it is necessary to establish certain legal protections. Please read the following, placing your initials after each paragraph, and signing at bottom to confirm your acceptance of and agreement with these terms. Note: you are the 'Releaser' and Calvary Chapel Salt Lake is the 'Releasee.'*

**ASSUMPTION OF RISK:** Releaser(s) understands, is aware of and assumes all risks inherent in participating in the Biblical Guidance Ministry including, but not limited to, any physical and emotional responses resulting from participating in this ministry. [initial(s) \_\_\_\_\_]

**COVENANT NOT TO SUE:** 'Releaser' and Releaser's' personal representatives, assigns, insurer, heirs, executors, administrators, spouse, and next of kin, hereby releases, waives, discharges and covenants not to sue Calvary Chapel of Salt Lake city, a non-profit 501c3 Corporation/ Church located at 460 West Century Dr. Salt Lake City, Utah 84123 and it's directors, officer's, employee's, agent's, staff, its volunteers as well as it's successor's, assign's affiliate's, subordinate's and subsidiaries all herein referred to as the 'Releasee,' from any and all liability to 'Releaser' and to 'Releaser's' personal representatives, assigns, insurer, 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 the 'Releaser,' whether caused by the negligence of Releasee or otherwise while Releaser is participating in the Biblical Guidance Ministry or other activities in connection with the Biblical Guidance Ministry. [initial(s) \_\_\_\_\_]

**INDEMNITY:** Releaser(s) agrees to indemnify Releasee from any liability, loss, damage or cost Releaser may incur due to the participation by the Releaser in the Biblical Guidance Ministry whether caused by the negligence of Releasee or otherwise. Releaser(s) assumes full responsibility for and risk of bodily injury, death or property damage due to negligence of Releasee or otherwise while participating in the Biblical Guidance Ministry. Releaser(s) expressly agrees that this Voluntary Release, Assumption of Risk and Indemnity Agreement, herein referred to as 'Agreement and Covenant,' is intended to be as broad and inclusive as permitted by the laws of the state of Utah. [initial(s) \_\_\_\_\_]

RELEASEE(S) REPRESENTS THAT; I/We have carefully read this agreement (in its entirety) - and - I/We understand it is a release of all claims, including the negligence of RELEASEE. - and - I/We understand that I/We assume all risks inherent in the Biblical Guidance Ministry set forth in the agreement. I/We understand that I/We am INDEMNIFYING THE RELEASEE. I/We voluntarily sign this evidencing an understanding and acceptance of these provisions. Dated: \_\_\_\_\_

Releaser(s) Signature(s) in writing: [Note: Guardian must sign on behalf of minor child]

X \_\_\_\_\_ X \_\_\_\_\_

# Biblical guidance



*"Let the wise listen and add to their learning and let the discerning get guidance."*

*Proverbs 1:5 NIV*



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# Calvary Chapel Salt Lake

## Request for Biblical Guidance

Calvary Chapel gladly provides Biblical guidance to those seeking such guidance. We are not a professional counseling service. We do not have professional psychologists, psychotherapists, or other, related, types of counseling available. Calvary Chapel only provides Biblical recommendations and Biblical guidance.

Date \_\_\_\_\_

Name (please print) \_\_\_\_\_

Sex \_\_\_\_\_ Age \_\_\_\_\_ Phone \_\_\_\_\_

Email \_\_\_\_\_

*Our counselors take time out of their schedules for the appointments please make every effort to make your scheduled appointments. What is the best way to reach you? Phone \_\_\_\_\_ Email \_\_\_\_\_*

Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_

### **PERSONAL INFORMATION:**

Rate your health (check): Very Good \_\_\_\_\_ Good \_\_\_\_\_

Average \_\_\_\_\_ Declining \_\_\_\_\_

Are you taking medication? No \_\_\_\_\_ Yes \_\_\_\_\_ Reason for medication? \_\_\_\_\_

Do you have problems sleeping? No \_\_\_\_\_ Yes \_\_\_\_\_

How many hours do you average each night? \_\_\_\_\_

### **AT ANY TIME IN THE LAST 7 YEARS: (\*Please print clearly\*)**

Have you had a severe emotional upset? No \_\_\_\_\_ Yes \_\_\_\_\_ Explain \_\_\_\_\_

Has anyone close to you died? No \_\_\_\_\_ Yes \_\_\_\_\_ Who/When \_\_\_\_\_

Have you used drugs for other than medical purposes? No \_\_\_\_\_ Yes \_\_\_\_\_ Describe \_\_\_\_\_

Have you been arrested? No \_\_\_\_\_ Yes \_\_\_\_\_ Explain \_\_\_\_\_

Have you had professional psychological counseling? No \_\_\_\_\_ Yes \_\_\_\_\_ Describe \_\_\_\_\_

What was the outcome? \_\_\_\_\_

Have you had church related guidance previously? No \_\_\_\_\_ Yes \_\_\_\_\_ Describe \_\_\_\_\_

### ***SPIRITUAL BACKGROUND:***

Church attended in childhood: \_\_\_\_\_

Do you believe in God? No \_\_\_\_\_ Yes \_\_\_\_\_ Uncertain \_\_\_\_\_ Do you pray to God? Never \_\_\_\_\_ Occasionally \_\_\_\_\_ Often \_\_\_\_\_

How frequently do you read the Bible? Never \_\_\_\_\_ Occasionally \_\_\_\_\_ Often \_\_\_\_\_

Do you have regular devotions? No \_\_\_\_\_ Yes \_\_\_\_\_ Describe \_\_\_\_\_

Denominational preference: \_\_\_\_\_ Member: Yes \_\_\_\_\_ No \_\_\_\_\_

Church Attendance per month (circle): 0 1 2 3 4 5 6 7 8+

Do you participate in a weekly fellowship group or ministry? Yes \_\_\_\_\_ No \_\_\_\_\_ Which: Have there been any recent changes in your spiritual life? if so, please describe: \_\_\_\_\_

Are you saved? No \_\_\_\_\_ Yes \_\_\_\_\_ Uncertain \_\_\_\_\_ Not sure what you mean \_\_\_\_\_

### ***MARRIAGE AND FAMILY INFORMATION:***

Marital Status (circle): Single Divorced Widowed Married — How Long? \_\_\_\_\_ Separated - How long? \_\_\_\_\_

Name of Spouse \_\_\_\_\_ Phone # \_\_\_\_\_

Occupation \_\_\_\_\_ Business Phone \_\_\_\_\_

Is spouse willing to come for guidance? No \_\_\_\_\_ Yes \_\_\_\_\_ Uncertain \_\_\_\_\_

Have you ever been separated? No \_\_\_\_\_ Yes \_\_\_\_\_ When and how long? \_\_\_\_\_

Have either of you ever filed for divorce? No \_\_\_\_\_ Yes \_\_\_\_\_ When? \_\_\_\_\_

Give brief information about any previous marriages: \_\_\_\_\_