

Welcome to House of Healing Ministry.

The fact that you have decided to fill out this detailed questionnaire says to us that you are at a point in your life where you are ready to deal with issues which have been keeping you from becoming all that God wants you to be, including in your relationships.

We would like to make sure that you have a clear understanding of what you may expect from us and in turn, what we expect from you.

Our Part;

1. We will commit to spend time in prayer asking the Holy Spirit how He would have us help you in your journey.
2. We will deal with generational curses which may be causing problems.
3. We will deal with hurts and wounds in the soul which may have built a faulty foundation in your belief system.
4. We will minister to your spirit man so that you may have the strength to win the battle you are in.
5. We will allow the Holy Spirit to direct the number of sessions required. The Christian Life is a process and we commit to help you along the way. After we deal with a few issues we will not schedule any more appointments until God is ready to deal with another issue. Paul calls this "working out your salvation", "from Glory to Glory." He's in charge and never ever fails.

Your Part;

1. We ask that you will commit to spend time in prayer asking the Holy Spirit to prepare you for the ministry each time.
2. We ask you to research your family history.
3. We ask you to be honest and as transparent with us.
4. Because we desire to be able to minister to anyone whom the Lord brings to us, we do not set a fee for our services. This means we live by faith, and requires those that are able to give to do so generously. That allows us to minister to those who cannot afford to get help otherwise.
5. We ask that you pray and ask the Lord how you are to support us. We have provided an opportunity below to make a commitment for the benefit of others.

___Prayer Support

___Single Donation at time of ministry

___Monthly support (\$ _____/mo)

___One time gift (\$ _____) Make checks payable to King of Glory.

Sign and return upon your first visit.

Signature_____

Date: _____

May God Richly reward you on your journey into wholeness.

Jim and Pat Banks

Release of Liability for Prayer Ministry

State of North Carolina, County of Buncombe

FOR AND IN CONSIDERATION of King of Glory Christian Fellowship and/or House of Healing Ministries of Swannanoa, North Carolina (HEREINAFTER CALLED KOG and HOH) referral for ministerial and prayer services, the undersigned, being fully legally competent, and fully authorized and competent to do so, does hereby RELEASE, ACQUIT AND FOREVER DISCHARGE KOG and HOH, ITS SUBBORDINATE MINISTRIES, AND ALL OFFICIALLY SANCTIONED ASSOCIATED MINISTRIES, AND ALL PARTICIPATING PRAYER MINISTERS CONNECTED WITH KOG AND HOH, from any and all actions, causes of action, claims, demands, damages, costs, loss of service, expenses and compensation, on account of any and all know or unknown personal injuries, mental anguish or agitation, and damage claims to personal or property resulting from or arising out of or related to ministerial services and prayer provided by the prayer ministers, KOG & HOH and/or agents, representative and or employees in any affecting the undersigned parties.

By law, there are certain situations in which information about individuals undergoing such ministry may be released with or without their permission. These situations are as follows;

1. Where children are physically abused, neglected or sexually abused, the proper authorities must be notified.
2. In emergency situations where there may be danger to the client or others, as with suicide or homicide, confidentiality may be broken.
3. If a court of law issues as legitimate subpoena relating to a child abuse case, we are required by law to provide the information relating to the subpoena.
4. If an unreported life-threatening felony has been committed, we are required by law to report it to the police.

Before warning or notifying anyone, we will first take all possible steps to share that intention with the undersigned parties.

The undersigned parties fully understand that the prayer ministry services provided are Biblical in nature and that they freely enter into such ministerial services with the full knowledge of the nature of the services they are about to receive. The undersigned parties further state that they are accepting the preceding of their own free will and accord and have not been unduly influenced or persuaded by anyone to participate in this prayer ministry. The undersigned parties state that they are seeking guidance and/or ministry and/or prayer ministry from KOG and the prayer ministers of their own free will, and fully understand that prayer ministry is advisory in nature and that decisions and actions taken by said undersigned parties based on anything said by KOG, or the prayer ministers, are ultimately their own decisions and actions, and that said undersigned parties take full responsibility for their decisions and actions.

The undersigned further to agree indemnify, and hold harmless the prayer ministers, KOG and HOH, its agents, representative, volunteers, ministers and employees from any and all claims and damages of every kind to person or property arising out of, or attributing to the spiritual, psychological, and/or mental problems which brought the undersigned to KOG or HOH, or experienced by the undersigned at any point after the date of this release.

IT IS FURTHER UNDERSTOOD, that this waiver and release constitutes an admission and acknowledgment by the undersigned that they have received no warranty, guarantee, or promise of any particular result either expressed or implied from KOG or HOH, its agents, representatives, volunteers, employees or ministers. The undersigned parties acknowledge and agree that the very nature of their problem(s) is necessarily as such that no specific results can be promised or warranted by any such ministry.

This release contains the entire agreement between the parties hereto, and the terms of this waiver and release are contractual and not a mere recital. The undersigned further states that he/she has carefully read the foregoing release, understands and knows to contents thereof, and signs same of their own free act and deed.

SIGNED ON THIS _____ day of _____, 200____, at _____

BY (print) _____ SIGN _____

PERSONAL MINISTRY QUESTIONNAIRE

The purpose of this life history is to obtain a comprehensive picture of your background. By completing these questions as fully and accurately as you can, you will facilitate your ministry. You are requested to answer these questions as though you have never had any ministry over these issues before. During the initial session we will ascertain which issues we do not need to revisit.

PLEASE: In sections where questions require a YES or NO answer, only mark a response where your answer is YES. If your response is NO, move on to the next question. If some particular question does not apply to you, such as previous marriage, simply write "N/A"

DATE _____

I. GENERAL INFORMATION

A. NAME _____

E-MAIL _____

B. ADDRESS _____

CITY _____ STATE _____ ZIP _____

HOME PHONE _____ CELL PHONE _____

C. AGE _____ DOB _____

PLACE of BIRTH _____

D. OCCUPATION _____

F. RELIGION _____ ATTENDANCE (circle one)
Regular, Occasional, Holidays, Never

_____ Are you born again? _____ Have you been water baptized?

_____ Were you water baptized before your received Jesus?

G. With whom are you now living? (List people, their names, ages, and occupations. If they are students indicate what grade.)

H. Marital Status (circle one);

Single Engaged Married Separated Remarried Divorced Widowed

I. How strongly do you want help with the issues you are dealing with;

Very much Much Moderately Could do without if necessary

J. Which of the Trinity are you most comfortable relating to (or with)? _____

III. DEVELOPMENTAL INFORMATION

A. Where did your parents grow up? _____

B. Approximately how many times did your family move; Before age six (6) ? _____
Between ages 6 and 12? _____ Between ages 12 and 18 ? _____
Since you left your parental home? _____ Your age when you left home ? _____

C. Did either of your parents attend college or vocational schools after your birth? YES NO

If so what was your age(s); _____

D. List all brothers and sisters in order of age. Include yourself. (note half-sisters/brothers, include stillbirths and miscarriages)

Name _____ Sex _____ Age _____ Job _____

Name _____ Sex _____ Age _____ Job _____

Name _____ Sex _____ Age _____ Job _____

Name _____ Sex _____ Age _____ Job _____

Name _____ Sex _____ Age _____ Job _____

Name _____ Sex _____ Age _____ Job _____

Name _____ Sex _____ Age _____ Job _____

Name _____ Sex _____ Age _____ Job _____

E. What maladies are in your ancestral line ?

___ Cancer ___ Dislexia ___ Heart disease ___ Arthritis ___ ADD/HDD ___ Addictions
___ Tumors ___ Diabetes ___ Allergies/Asthma ___ Hypoglycemia ___ Mental disorders
___ Kidney/Liver disease ___ High/Low Blood Pressure ___ Stomach/digestive tract disorders
___ Glaucoma ___ Spinal/limb deformities ___ Premature death ___ Nerve disorders
___ Birth defects ___ Reproductive Prob's ___ Financial Prob's ___ Business Lost ___ Adultery
___ Inheritances Lost/stolen ___ Divorce ___ Poverty ___ Rebellious Children ___ Abuse
other; _____

F. Are there any relational dysfunction or behavioral problems recurring in your family line? (Ex; hyper-religiosity, joblessness, violence, incarceration):

G. How have your tried to resolve this issue in the past? _____

H. Do you hold unforgiveness against anyone? _____

G. Childhood:

1. Mother's condition during pregnancy (as far as you know) _____

2. Do you know whether your birth was difficult or traumatic?
____ Extremely prolonged labor ____ Placenta Previa ____ Breach ____ C-Section
____ Cord around neck ____ Blue baby ____ Delivered early
____ Delivered late ____ Mother was drug addicted ____ Mother was not conscious at birth
Other; _____

3. When you were born, were you;
____ Adopted ____ Illegitimate (Conceived out of wedlock) ____ Not Wanted ____ Surprise
____ The wrong sex ____ Preceded by a miscarriage ____ A replacement for someone who died

4. During your mother's pregnancy with you, did she;
____ Smoke ____ Drink ____ Take drugs ____ Have difficulties ____ Eat poorly ____ Work
____ Consider an abortion ____ advised that her life was in danger ____ Consider giving you up for adoption
____ Have significant morning sickness ____ Bed Ridden ____ Become severely ill or disabled
____ Was she physically abused ____ Suffer the loss of a family member ____ Not know for sure who your father was
____ Have struggles with parents or in-laws ____ Did your father separate, leave, divorce or die ? ____ Experience trauma

5. Were you breast fed? _____

6. Underline any of the following that apply during your childhood:

Night terrors Bed-wetting Sleep walking Thumb-sucking Nail-biting Stammering Fears
Happy Childhood Unhappy Childhood Chronic Illness No or few memories of childhood

H. Physical and Mental Health Issues:

1. Health during childhood: _____

2. List childhood illnesses: _____

3. Health during adolescence: _____

4. Any physical disabilities? _____

If so, is it related to your present issue? _____

5. Any surgical operations? Please list them, and at what age they occurred:

6. When was the last time you felt well, both physically and emotionally, for a fair amount of Time?

7. List all trauma (accidents, injuries, violence, car accidents, periods of high stress & tension);

8. Have you ever been to a Psychologist or Psychiatrist ? **YES** **NO**

What was the diagnosis? _____

_____ Have you ever been hospitalized for psychiatric problems ?

_____ Were you administered drugs or shocks treatment ?

9. **Underline** any of the following that apply to you:

Headaches; Dizziness; Fainting spells, Palpitations; Stomach trouble; No appetite; Bowel disturbances; Fatigue; Insomnia or other sleep issues; Joint & muscle pain; Nightmares; take Sedatives; Alcoholism; Feel tense; Feel panic; Tremors; Depressed; Suicidal thoughts; Confused; Excessive debt; Drugs addiction; Unable to relax; Sexual problems; Unable to have a good time; Don't like weekends and vacations; Moody; Escapism/Excessive fantasies; Have no emotion(s); Can't sleep; Over-ambitious; Shy with people; Can't make friends; Feel lonely; Can't make decisions; Can't keep a job; Inferiority feelings; Home conditions bad; Financial problems; No vision for the future; Recent death in the family; Death of a loved one; Work related stress; Marriage problems; Addictions; memory problems; Other stress issues; Legal problems; Frequent bad dreams; hear voices; Other;

9. Are you currently under a Doctor's care? If so, for what ailments? _____

10. Are you currently taking and medications? If so, for what? _____

IV. AVOCATIONAL INTERESTS

A. Games and interests during childhood; (including make-believe)

B. Interests and hobbies during adolescence;

C. Present interests, hobbies, activities, organizations:

D. How is your free-time occupied?

V. EDUCATION

A. Last grade you completed _____

Degree(s)/Dates; _____

B. Relationship to schoolmates: _____

C. Scholastic abilities and disabilities; _____

D. Were you ever bullied, or given a nickname? Please explain briefly: _____

E. Do you make friends easily? Do you keep them? _____

VI. OCCUPATION

A. Age when you started working & why; _____

B. How many jobs have you held ? _____ Average length of time in jobs? _____

C. Does your present work satisfy you? (If not, in what ways are you dissatisfied?) _____

D. Your current Ambitions and aspirations _____

VII. SEX INFORMATION

A. Parental attitudes toward sex. (for example, was there sex instruction or discussion in the home?)

B. When and how did you derive your first knowledge of sex? _____

C. How and when did you first become aware of your sexual impulses? _____

D. Did you ever make blood oaths with other children as a child? _____

E. Were you ever molested or raped? _____

F. Who were you involved with sexually? (List names if possible)

G. Have you had an abortion ? At what age(s)? _____

H. Have you fathered an aborted child? _____

J. Have you been involved in pornography or internet pornography? **YES NO**
Are you still involved? **YES NO** If YES, do you masturbate? **YES NO**

K. Have you fathered a child you refused to accept responsibility for ? _____

L. Have you ever committed adultery? **Yes No** More than once? _____

M. Are you currently involved in an illicit sexual relationship? _____

N. Did you ever experience any anxieties or guilt feelings or trauma arising out of masturbation? If yes, please explain.

O. Did you ever experience any anxieties or guilt feelings or trauma arising out of sexual experience with the **opposite** sex? If yes, please explain.

P. Did you ever experience any anxieties or guilt feelings or trauma arising out of sexual experience with the **same sex** (homosexuality/lesbianism)? If yes, please explain:

Q. Have you ever had a dream in which you had sexual intercourse and wake up having a climax? Or “feel” a presence in bed with you? _____

R. Do you currently have sexual performance problems? (ie, frigidity, impotence) _____

S. Is there any question or concern you have about sex past, present, or future, or sexual identity?

T. Were you ever emotionally close to someone you never married? _____

U. Have you ever had sexual involvement with animals? _____

V. Have you ever had sex with a dead body? _____

VIII. MARITAL HISTORY (Present Marriage)

A. How long did you know your partner before engagement? _____ For how long were you engaged? _____ How long have you been married? _____ Did you have sex before marriage? _____ Are you currently living together? _____

B. Please describe something of what you like and dislike about your mate;

What I liked the first few years:

What my mate liked the first few years:

What my mate disliked the first few years:

What I have liked the past few months:

What I have disliked the last few months:

What my mate has liked/disliked the last few months:

C. In what areas are you most compatible?

D. In what areas is there incompatibility?

E. How do you get along with your in-laws? (Include brothers & sisters in-law)

F. Give specific examples of those you would like to see your spouse **do more** often? (e.g., take the garbage out, bring you a cup of coffee when you have just sat down to relax.)

G. Give three examples of things you would like to see your spouse **stop** doing. (three particular things that irritate you.)

H. Describe your sexual relationship;

IX-A. MARITAL HISTORY (Previous Marriage)

A. Age when you married? _____ For How long? _____ How long did you know your first spouse before engagement? _____ Length of engagement? _____ Did you have sex before marriage? _____ Are you still in relationship? _____

B. Please describe something you liked and disliked about your previous mate:

What I liked:

What I disliked:

C. Please describe something your previous spouse liked and disliked about you;

D. Reason for dissolution of the marriage;

IX-B. MARITAL HISTORY (Previous Marriage)

A. Age when you married? _____ For How long? _____ How long did you know your first spouse before engagement? _____ Length of engagement? _____ Did you have sex before marriage? _____ Are you still in relationship? _____

B. Please describe something you liked and disliked about your previous mate:

What I liked:

What I disliked:

C. Please describe something your previous spouse liked and disliked about you;

D. Reason for dissolution of the marriage;

If there have been more than two(2) previous spouses, check ___ here and answer these same questions on the reverse side of this sheet.

X. FAMILY DATA

A. **“Father”** means the man who took primary responsibility for raising you. If that is a different person than your biological father, please describe what you know of your biological father on the backside of this page, and describe the man you call “father” on this page.

Father’s Name _____ Current Age: _____

Occupation: _____ Health (circle one): **Good** **Average** **Poor**

Education: _____

Father’s ancestral nation of origin: _____

If deceased, cause of death and age at death: _____

Your age at the time of his death: _____

Kind of person (describe):

His religious background was;

His ambition for you:

His relationship to wife (your mother):

His favorite child, and why:

Which child was most like dad and why:

Which child was most different from dad, and why:

As a child, what I liked about my dad:

As a child, what I disliked about my dad:

How did he discipline you?

Any major health issues for him or his family (mother or father or grandparents)?

X. FAMILY DATA (Continued)

B. “**Mother**” means the woman who took primary responsibility for raising you. If that is a different person than your biological mother, please describe what you know of your biological mother on the backside of this page, and describe the woman you call “mother” on this page.

Mother’s name: _____ Current Age: _____

Occupation: _____ Health (circle one): **Good** **Average** **Poor**

Education: _____

Mother’s ancestral nation of origin; _____

If deceased, cause of death and age at death: _____

Your age at the time of her death: _____

Kind of person:

Her religious background was;

Her ambition for you:

Her relationship to husband (your father):

Her favorite child, and why:

Which child was most like mom and why:

Which child was most different from mom, and why:

As a child, I liked about my mom:

As a child, I disliked about my mom:

C. In what ways were you disciplined by your parents as a child?

D. Give an impression of your home atmosphere. (I.e., the home in which you grew up).

E. Were you able to confide in your parents?

F. If not brought up by your parents, who did raise you? Between what years? If you were raised by your parents, was there another parental figure?

G. Any major health issues for her or her family?

H. Please try to remember any fearful or distressing experiences not previously mentioned.

I. Any Native Americans in your family line?

XI. SELF DESCRIPTION

A. Give a word picture (description of your self as you would be described by:

1. Your spouse:

2. Your best friend:

3. Your worst enemy:

4. Yourself:

B. Complete the following sentences;

As a child, I ...

For me, school was ...

My childhood ambitions were ...

My childhood fears were ...

My role in my group of friends was ...

The significant events in my physical and sexual development were ...

The significant events in my social development were ...

The important values in my family were ...

What stands out the most for me about my family life is ...

Brother's and sister's relationships to **dad** was ...

Brother's and sister's relationship to **mom** was ...

My parent's relationships to us children was ...

The atmosphere of our home was ...

XII. GENERAL INFORMATION

A. In your ancestral line was there any Freemasonry? _____ Paternal Maternal

Other; _____

Any involvement with secret societies; _____

B. REBELLION

- _____ Was there rebellion/pride witchcraft in your family ancestral line?
- _____ Do you like you?
- _____ Do you condemn your self for the past?
- _____ Do you like your name?
- _____ Have you ever had suicidal thoughts? _____ Do you still?
- _____ Do you please men rather than God?
- _____ Are there things that God has told you to do that you haven't done?
- _____ Are you compromising your Christian walk any where in your life?
- _____ Are there habits in your life you know God doesn't want (sexual addictions, smoking, Alcoholism, drugs, gambling, food, etc.)
- _____ Are you glad God gave you the parents he did?
- _____ Were you rebellious to your parents? How?
- _____ Were/Are you rebellious to you husband? How?
- _____ Were/Are you rebellious to your Grandparents? How?
- _____ Have you ever attempted suicide?
- _____ Were you rebellious to teachers, Sunday School teachers, coaches, etc.?
- _____ Were you rebellious to any military leaders or any civilian bosses? How?
- _____ Have been convicted of a felony? If Yes, for what? _____
- _____ Have you been rebellious to or have you dishonored any government officials? How?
- _____ Have you followed authority when they wanted you to do something sinful or unethical? How?
- _____ Have you abused or lorded over those under your authority? How?
- _____ Have you provoked your children to anger?
- _____ Have you ever purposefully injured or mutilated yourself?
- _____ Have you ever served time in prison? More than once? _____
- _____ Have you ever filed bankruptcy? More than once? _____
- _____ Have you refused to work and lived off of others?
- _____ Have you not loved/Honored your wife?
- _____ Have you submitted to pastor/elders in all they have asked you to do?
- _____ Have you committed to and become a member of a local church?
- _____ Are you serving others in your local church?
- _____ Have you taken illegal drugs? How long? _____ At what age(s)? _____
- _____ Are you taking illegal or abusing legal drugs now? _____recreationally or addicted _____
- _____ Have you been involved in any witchcraft or occult areas?
 - _____ Astral projection _____ Ouiji board _____ table lifting _____ esp
 - _____ Dungeons & Dragons _____ speaking in trances _____ automatic writing
 - _____ Magic 8 ball _____ séance _____ fortune telling _____ clairvoyance
 - _____ spirit guides _____ astrology _____ tarot cards _____ palm reading _____ angel cards
 - _____ hypnosis _____ casting spells _____ yoga _____ blood covenants/Oaths
 - _____ incubi _____ martial arts _____ masonry _____ mind control _____ drugs
 - _____ rock music (death metal etc) _____ horoscope _____ Physic Healing
 - _____ horror movies _____ invisible friends _____ reincarnation _____ others
- _____ Have you ever channeled to speak to a dead person? _____ or to gain information?
- _____ Have you ever read bones, dice, cards or other to gain info or make a decision?

Have you ever been involved in any false religions or cults ?
 Christian Science Scientology Unification Church Mormonism
 Way International Jehovah's Witness Armstrongism Masons
 Unitarianism New Age Unity Hari Krishna Rosicrucian
 Transcendental Meditation Eckankar Father Devine Islam
 Silva Mind Control Black Muslims Hinduism Bahaism Kaballa
 Other _____

Have you ever had someone totally dominate/control you?
 Have you totally dominated/controlled you?
 Have you intimidated anyone with anger to get your way?
 Have you been controlled by guilt?
 Have you seduced to get your way?
 Have you ever been controlled by sex?
 Have you used emotionalism to get your way?
 Have you ever controlled another by sex?
 Would you consider yourself a fixer?
 Are you in bondage/slavery to any idols (ie., food/drugs, alcohol, sex, pornography, etc)
 Do you consider yourself to be an angry person?
 Would you consider yourself a perfectionist?
 Do you retreat into fantasies when things get emotionally difficult?
 Were you ever beat down/dominated/intimidated by your parents or spouse?
 Were you ever regularly controlled/manipulated through guilt by anyone?
 Has anyone ever been able to exert undue influence over your life?
 Have you ever submitted to any spirit leader/guides in a cult?
 Have you made any oaths to, or covenants with an institution?

Do you consider yourself to be, or have a problem being (circle all that apply);

Anger Impatient Irritable Quick tempered Racially prejudiced
 Shut down emotionally Have different parts of you in control from time to time?

Have you ever found yourself driving down a highway or interstate and suddenly realize you are well past your turn or exit?
 Are you having difficulty remembering things?
 Do you find yourself tuning people out during a conversation and suddenly come to the realization that they've been talking for a while and you haven't the foggiest notion what they've been saying?
 Have you recently forgotten things, like leaving for work without your wallet or purse?
 Have you recently forgotten major appointments, or to pick up your children after an event?
 Have you been accused of saying things you can't remember having said, or being in situations you have no memory of?
 Have you found receipts for expenditures you don't remember making?
 Have you experienced significant recent changes? Such as; sudden clumsiness, a major change in taste; forgetfulness; moodiness, irritability; sleep patterns; etc.
 Are you experiencing difficulty focusing or maintaining attention while doing important tasks? Is this a major change from the norm? Y/N When did it start? _____
 Do you hear voices from time to time?
 Have you ever felt a presence with you from time to time?

Did you see angels or demons as a child?
 Have you had one or more recurring dreams? (if so, write it down on the back of this sheet)
 Do you see angels or demons now?

- _____ Do you see black and/or white dots whizzing by in your peripheral vision from time to time?
- _____ Did you ever have an open vision as a child? Do you still have them? Y/N
- _____ As a child did you have numerous nightmares or violent dreams? Do you still have them? Y/N
- _____ As a child were you afraid of specific rooms in your home, or in the homes of friends or grandparents?

C. VOWS

- _____ No one will ever control me again.
- _____ No one will ever tell me what to do again.
- _____ I'll never work for _____ again.
- _____ I don't have to listen to anyone.
- _____ I'll never be submitted to anyone again, only Jesus.
- _____ I'll never trust or believe another pastor.
- _____ I'll not work for another man/woman.
- _____ I'm not going to let the boss walk all over me.
- _____ I'm not going to tell my boss any more than I have to.
- _____ I'll never do (_____) again.
- _____ I'll never let anyone get that close to me again.
- _____ I'll always _____.

Other vows _____

E. JUDGEMENTS

AGAINST FATHER		AGAINST MOTHER	YOUR Behavior
_____	Did not say “ I Love you”	_____	_____
_____	Did not demonstrate love/hugs	_____	_____
_____	Disciplined harshly	_____	_____
_____	Did not keep promises	_____	_____
_____	Did not provide well	_____	_____
_____	Have anger/temper	_____	_____
_____	Abusive Sexually/Verbally/emotionally	_____	_____
_____	Did not manage money well	_____	_____
_____	Did not compliment me	_____	_____
_____	Did not teach or train me	_____	_____
_____	Preferred brothers/sisters	_____	_____
_____	Did not attend school functions or activities	_____	_____
_____	Was an workaholic, never at home	_____	_____
_____	Was an alcoholic	_____	_____
_____	Was unapproachable (feared)	_____	_____
_____	Weak	_____	_____
_____	Too Strong	_____	_____
_____	Unfaithful to other parent	_____	_____
_____	Crude	_____	_____
_____	Hypocritical	_____	_____
_____	Stubborn	_____	_____
_____	Selfish	_____	_____
_____	Jealous	_____	_____
_____	Impatient	_____	_____
_____	Proud	_____	_____
_____	Embarrassing to you	_____	_____
_____	Controlled by his/her parents	_____	_____
_____	Never wrong	_____	_____
_____	Very overweight (gluttonous)	_____	_____
_____	Dishonest	_____	_____
_____	Autocratic/domineering/controlling	_____	_____
_____	Expects to much from me	_____	_____
_____	Hard to please	_____	_____
_____	Cold and indifferent	_____	_____
_____	Manipulative	_____	_____
_____	Had a problem with sex	_____	_____
_____	Didn't listen to me	_____	_____
_____	Did not protect me	_____	_____
_____	Did not want me	_____	_____
_____	Wanted me to be the opposite sex	_____	_____
_____	Talked to much	_____	_____
_____	Emotional/fearful	_____	_____
_____	Not a good housekeeper	_____	_____
_____	Not submissive to father	_____	_____
_____	Always lied about things	_____	_____
_____	Refused to bless my marriage	_____	_____
_____	He/She is always negative	_____	_____

E. JUDGEMENTS - Continued

	AGAINST SPOUSE	AGAINST PREVIOUS SPOUSE
_____	Deceived me about himself/herself before marriage	_____
_____	Tricked me into marrying him/her	_____
_____	God told me to marry him/her	_____
_____	_____ Married him/her for the wrong motive	_____
_____	_____ for money	_____
_____	_____ to escape bad situation at home	_____
_____	_____ to get parent for my children	_____
_____	_____ for sexual reasons	_____
_____	_____ on rebound from broken relationship	_____
_____	_____ for convenience	_____
_____	_____ because parents wanted it	_____
_____	_____ because parents did NOT want it	_____
_____	_____ for social standing	_____
_____	_____ out of fear of never getting married	_____
_____	Withholds self sexually	_____
_____	Lets parents control them	_____
_____	Controls/manipulates me	_____
_____	Overly concerned with material things/ money	_____
_____	Lets his/her appearance go	_____
_____	Has anger	_____
_____	Controls/dominates	_____
_____	Spiritually weak/lazy	_____
_____	Critical/hard to please	_____
_____	Overweight	_____
_____	Workaholic	_____
_____	Selfish	_____
_____	Stubborn	_____
_____	Does not communicate	_____
_____	Does not handle money well	_____
_____	Irresponsible	_____
_____	Lazy	_____
_____	Not affectionate	_____
_____	Doesn't say I love you	_____
_____	Perverted	_____
_____	Abusive Physically/Sexually/Verbally/Emotionally. . . .	_____
_____	Abusive Verbally/emotionally	_____
_____	Disciplines children too harshly	_____
_____	Unfaithful to me	_____
_____	Not a good provider	_____
_____	Impatient	_____
_____	Jealous	_____
_____	Doesn't do their part around the house	_____
_____	Alcohol/drug problem	_____
_____	Not listen	_____
_____	Not spiritual	_____
_____	Money/material oriented	_____
_____	Hard to please	_____
_____	Always lied about something	_____

F. JUDGEMENTS - AGAINST MEN/WOMEN

AGAINST MEN

AGAINST WOMEN

_____	They are angry	_____
_____	They are insincere	_____
_____	They are undependable	_____
_____	They cannot be trusted	_____
_____	They are irresponsible	_____
_____	They are selfish	_____
_____	They are insensitive	_____
_____	They are too sensitive/emotional	_____
_____	They are too strong	_____
_____	They are too weak	_____
_____	They are jealous	_____
_____	They are proud	_____
_____	They are hard/callous	_____
_____	They are abusers	_____
_____	They are not teachable	_____
_____	They are stubborn	_____
_____	They are too spiritual	_____
_____	They are not spiritual enough	_____
_____	They are indecisive	_____
_____	They are critical/picky	_____
_____	They are controlling/bossy/dominating	_____
_____	They are manipulative	_____
_____	They are superficial	_____
_____	They are afraid of intimacy	_____
_____	They do not listen	_____
_____	They do not communicate	_____
_____	They talk too much	_____
_____	They are nosey	_____
_____	They are gossipy	_____
_____	They are unable to keep a secret	_____
_____	They are conniving/sneaky	_____
_____	They are rebellious	_____
_____	They are hard to please/never satisfied	_____
_____	They are workaholics	_____
_____	They are men/women haters	_____
_____	They are not there for women/men	_____
_____	They hold women back	_____
_____	They are interested in only one thing	_____
_____	They are flighty	_____
_____	They are frigid	_____
_____	They are not safe	_____

G. JUDGEMENTS AGAINST PASTORS/CHRISTIANS/GOD

AGAINST PASTORS

- ___ Unavailable
- ___ Unteachable
- ___ Don't handle money well
- ___ Have money motive in heart
- ___ Building own empire
- ___ Compromising
- ___ Hypocrites
- ___ Manipulative
- ___ Controlling
- ___ In it for self gain
- ___ Refuse personal relationship
- ___ Prefer others/have favorites
- ___ Can't see the whole picture
- ___ Not trustworthy to keep a confidence
- ___ Critical/Judgmental
- ___ Legalistic
- ___ Don't care who they hurt

AGAINST CHRISTIANS

- ___ Hypocrites
- ___ Free loaders
- ___ Deceived
- ___ Weak
- ___ Lazy
- ___ Compromising
- ___ Undisciplined
- ___ Won't keep their word
- ___ Not trustworthy
- ___ Superficial
- ___ Arrogant
- ___ Critical/Judgmental
- ___ Weird
- ___ Legalistic
- ___ Always right

AGAINST GOD

- ___ Doesn't love me
- ___ Doesn't hear me
- ___ Doesn't protect me
- ___ Isn't there for me
- ___ He's confusing
- ___ Hard to please
- ___ Made a mistake when he made me
- ___ Clobbers me for a mistake
- ___ Too busy for me
- ___ Doesn't provide for me
- ___ Prefers others
- ___ Isn't interested in me
- ___ Doesn't keep his promises
- ___ Distant

- ___ Too unpredictable
- ___ Makes me work for everything
- ___ Indifferent to my needs
- ___ Disappointed in me
- ___ Betrayed me
- ___ Abandons me
- ___ Not able to be trusted
- ___ Not consistent
- ___ Won't speak to me
- ___ Waiting to punish me
- ___ Uninvolved in daily life

Others; _____

H. INNER VOWS

- _____ I'll not be like my father (mother).
- _____ I'll not discipline my kids like I was.
- _____ I'll not treat my kids like my parents treated me.
- _____ I'll never leave and desert my wife (husband) and kids.
- _____ I'll never get married (again).
- _____ I'll never do _____ again
- _____ I'll never let anyone man/woman get close to me again.
- _____ I'll never marry anyone like my mother/father.
- _____ I'll never go to work and leave my kids home alone.
- _____ I'm going to make sure my kids get the things I didn't.
- _____ No one's going to tell me what to do.
- _____ No one's going to tell me what to eat.
- _____ No one's going to control me again.
- _____ No woman is going to control me like my mother did my father
- _____ I'll never trust another man/woman
- _____ I'll never let another man/woman take advantage of me
- _____ I'll never work for another man/woman
- _____ I'll never hire another Christian
- _____ I'll never do business with another Christian
- _____ I'll never trust another pastor
- _____ I'll not treat my spouse like my father/mother did
- _____ I'll not scream and holler at my kids like my mother/father did
- _____ I'll never go to church again
- _____ I'll never work for anyone else again
- _____ I'll not submit to any man, only Jesus
- _____ I'm not going to let anyone walk all over me
- _____ I'll never get free
- _____ I'll never lose weight/quit smoking/drinking etc.
- _____ I'll never let my kids go through what I went through
- _____ My kids will all have a college education
- _____ I'll kill the person who molests my child
- _____ I'll make it by myself
- _____ I'm trapped and can never get out of _____
- _____ No one will ever control me
- _____ No one will tell me what to do
- _____ I don't have to listen to anyone
- _____ I'll not trust or believe another pastor
- _____ I'm not going to let the boss walk all over me
- _____ I'm not going to tell anyone any more than I have to.

Other vows _____

J. Many times immediately prior to a scheduled ministry session the Lord will give you a dream, or dreams. You may also recall a long forgotten scene or replay a memory. Write them here.

End 12-5-07