



## **COMMITMENT TO THE HEALING PROCESS**

I understand that spiritual healing (Christian counseling and deliverance) takes time. It is not a “quick fix” or an immediate solution. For these efforts to be effective, I must do my part — remaining committed to implementing what is instructed and actively participating in the process.

If at any point the counselor determines that I am no longer engaged or committed, they may discontinue counseling efforts at their discretion.

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## **FULL DISCLOSURE AND CONSENT TO EXCLUSIVITY**

For the effectiveness of spiritual healing and deliverance, it is essential that all information shared be complete and truthful. I agree to be open and honest regarding the following:

- Any drug use (past or present)
- Any prescription medications I am currently taking
- Any alcohol use
- Any sexual perversion or related struggles
- Any previous psychological or mental health diagnoses
- Any other counseling, inner healing, or deliverance efforts I am presently involved in

Our ministry requires that during your spiritual healing process, you work **exclusively with Identity In Christ, Inc.** We have found that working with multiple spiritual healing ministries, counselors, or other healing organizations at the same time can create confusion or interference, which may hinder spiritual and emotional progress.

Also, all inner healing requires **rest and recovery**. Engaging in too many sessions or overlapping healing activities can become counterproductive.

*Therefore, I commit to working solely with this ministry for the duration of my healing journey.*

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## **FEES**

All fees must be paid **before** an appointment.

### **Services:**

- **Initial Consultation (45 minutes)** — \$20
- **Counseling (1 hour)** — \$60
- **Emotion Code (1 hour)** — \$60
- **Follow-Up Check-In / Overflow (15 minutes)** — \$25
- **Zoom Deliverance (2 hours)** — \$100

### **Special services:**

- **Counseling (1.5 hours)** — \$80
- **In-person Deliverance (2 hours)** - \$175
- **Exorcism (2 hours)** - \$300

### **PACKAGES**

#### **Healing Package - \$165** (save \$15)

- 3 sessions (any mix of 1 hour Counseling and Emotion Code)

#### **Recovery Package - \$220** (save \$20)

- 4 sessions (any mix of 1 hour Counseling and Emotion Code)

#### **Breakthrough Package - \$365** (save \$35)

- 5 - 1 hour Counseling or Emotion Code sessions (any mix of these)
- + 1 Zoom Deliverance (2 hours)

#### **Transformation Package - \$540** (save \$60)

- 10 sessions (any mix of 1 hour Counseling and Emotion Code)

*There is no discount if a session ends early (whether by choice or because all spiritual work is complete).*

**You will be sent an invoice for all appointments with a link for payment.**

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### **CANCELLATIONS**

#### **Counseling, Emotion Code, and Consultations**

Cancellations (via text, email, or phone call) must be made at least **one hour before** the scheduled time. After that, you will be charged **\$20** (regardless of the appointment rate).

If there is still no notification of cancellation after **three days**, you will be charged the full session rate, your regular time slot will be released for others and our counseling agreement will be terminated.

#### **Deliverances**

Cancellations (via text, email, or phone call) must be made at least **24 hours before** the scheduled time. After that, you will be charged **\$50** (regardless of the appointment rate).

Failure to show up for a deliverance (without notification after **three days**) will result in billing at the full rate of the service and our counseling agreement will be terminated.

## Missed Appointments

If you miss an appointment without providing any notification, our ministry reserves the right to **discontinue the counseling relationship**. This policy ensures that time and resources are honored and that appointments remain available to those who are ready and committed to their healing journey.

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## Session Recording Consent

Identity In Christ, Inc. may record sessions (audio or video) for training, accountability, and internal record-keeping. These recordings are **strictly confidential** and may only be viewed by individuals who work for Identity In Christ, Inc.

By signing below, I acknowledge and agree:

- My sessions may be recorded for internal ministry purposes.
- Recordings will not be shared outside of Identity In Christ, Inc.
- Recordings are used only for documentation, training, accountability, or ministry review.

## Acknowledgment

I have read, understand, and agree to the terms and conditions outlined above. I commit to honesty, consistency, and cooperation throughout the counseling and deliverance process.

**Client Name (Print):** \_\_\_\_\_

**Client Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_



## CLIENT INTAKE FORM



**Full Name:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_ **Age:** \_\_\_\_\_

**Marital Status:** ☐ Single ☐ Married ☐ Divorced ☐ Widowed

**Phone Number:** \_\_\_\_\_ **Email:** \_\_\_\_\_

### Full Disclosure (Confidential)

Please answer truthfully. This information is kept private and helps us better understand your situation and spiritual needs.

**1. Are you currently using any recreational drugs (past or present)?** ☐ Yes ☐ No

If yes, please explain: \_\_\_\_\_

**2. Are you currently taking any prescription medications?** ☐ Yes ☐ No

List medication(s) and purpose: \_\_\_\_\_

**3. Do you consume alcohol?** ☐ Yes ☐ No

If yes, how often? \_\_\_\_\_

**4. Have you ever been involved in or struggled with sexual perversion or related behaviors?** ☐ Yes ☐ No  
(Examples: pornography, fornication, adultery, same-sex activity, etc.)

If yes, please describe briefly: \_\_\_\_\_

**5. Have you been previously diagnosed with any psychological or mental health conditions?**

☐ Yes ☐ No

If yes, please list: \_\_\_\_\_

**6. Are you currently working with any other counselor, therapist, inner healing, or deliverance ministry?**

☐ Yes ☐ No

If yes, please list: \_\_\_\_\_

*(Emotional, spiritual, relational, physical symptoms, patterns, or any issues you believe need healing or deliverance.)*

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