

PLEASE FILL OUT, SIGN, AND RETURN. THANK YOU.

Wellspring Ministries
A Nonprofit Ministry
2511 Sentry Drive
Anchorage AK 99507
OFFICE (907)563-9033 -- FAX (907)243-6623

RIGHT TO KNOW: Disclosure, Information & Agreement to the Ministry Process

MINISTRY: Our ministry model is based on the principles of Scripture, and depends on gifts of the Holy Spirit to help us understand the roots of our problems, to forgive those who have wounded us, and to receive forgiveness for judging ourselves and others.

PAYMENT: Wellspring Ministries is funded by God's people under the Biblical principle of sowing and reaping. It costs Wellspring \$95.00 to provide you with a ministry session. We know that some cannot afford to pay the entire amount each session. Therefore we are happy to accept any amount that you can afford toward your ministry time. Would you prefer to pay for your sessions by credit card _____ or mail us a check _____? Please indicate the amount per session: _____.

APPOINTMENT TIME: A ministry session typically consists of 75 minutes.

CANCELLATION POLICY: If the client, who has made a predetermined appointment, has not called in to cancel 24 hours prior to the appointment time. Or has not called or appeared within 15 minutes of start of that appointment time, other clients who have requested to be on a Call when there is a Cancellation List will be contacted to take that appointment time. If the missed appointment cannot be filled, the appointment time will be charged to the client.

INSURANCE: It is our understanding that insurance carriers do not typically cover our ministry services. *No one on staff is a licensed clinical psychologist, psychiatrist or counselor.*

SATISFACTION or NON-SATISFACTION of SERVICES RENDERED: Prayer ministry is more of an art than science therapeutically speaking and its outcome depends on a number of factors. Therefore, it is understood as the client enters into a relationship with the individual(s) providing ministry, the prayer ministry provides an opportunity for healing, in which no promises or guarantees can be made relative to the outcome or personal satisfaction.

It is agreed that the client always has the privilege of termination at any time for any reason. Wellspring Ministries of Alaska may refuse to provide ministry services or refer clients as deemed necessary.

PHYSICAL CONTACT: At times, with the client's permission, hugs are given.

PERMISSION, CONFIDENTIALITY, DUTY TO REPORT: I do hereby give permission for the ministry staff to consult with each other as needed. I understand my right to confidentiality will be respected as is appropriate using Matt 18:15 & 16 as a guide. It is with this understanding that the undersigned does enter into a ministry relationship and assumes the responsibilities as set forth.

Ownership of our files: It is agreed that our notes and files are the property of Wellspring Ministries and cannot be released to anyone. We choose not to be involved in court proceedings.

Agreed & acknowledged RIGHT TO KNOW by: _____
(Signature) (Date)

I have a copy of this agreement for my records: _____
(Signature) (Date)

Printed Name: _____ Phone/cell Number: _____

Address, City, State, Zip _____

Email Address: _____