HSE Prayer Rooms

Liability Release Form for Holy Spirit Encounter LLC

I (name) ________ acknowledge that team members from HSE (Holy Spirit Encounter) have voluntarily agreed to pray for me (the above-mentioned name). I understand the prayer session I will be involved in is not a professional counseling session/meeting and that none of the team members are licensed counselors. I understand 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 HSE is a nonprofit organization. I further state that I have voluntarily sought this ministry of my own initiative and I am under no obligation to accept or reject any of the advice or help that might be given from the team members of this ministry.

I understand when ministry from HSE is received the team is committed to respect the disclosed information but not to complete confidentiality. Any information received, as needed, may be shared with other leaders of HSE as to further the total healing process. I understand that HSE mandatorily reports child and elder abuse to the proper authorities.

I agree to hold HSE 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 from HSE.

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 as parent or guardian.

 (Print Name)

_____ (Signature)

_____ (Date)

White Columns at Kingston Kingston, GA (Location)