CONFIDENTIAL Pre-Marital Pastoral Counseling Form

ANY COUPLE that would like to be married by a pastor from our church, OR who would like to use our church for their wedding ceremony, OR would like pre-marital counseling from our church, must FIRST turn in this form and have a preliminary meeting with Pastor Matt Jones.

To schedule your preliminary meeting with Pastor Matt, please call and set up an appointment with the church office (310 – 823 – 4275 x.715).

Prior to the preliminary meeting, the following form must be filled out in detail BY BOTH THE MAN AND THE WOMAN and returned to the church office at least 4 DAYS PRIOR to the scheduled meeting. For purposes of confidentiality please mail the completed form to the church office (8505 Saran Drive, PDR, CA 90293) or give it personally to the church secretary or one of the church pastors at a Sunday service.

Do you have a personal connection to our church? ( ) No ( ) Yes If yes, what is the connection: I have been attending the church for ________ months / years. OR I have a family member that regularly attends the church? (Their name/s:_______________________________________) Your relationship to them:_________________________
5 PRE-REQUISITES FOR BEING MARRIED BY A PASTOR FROM OUR CHURCH, AT OUR CHURCH AND/OR HAVING PRE-MARITAL COUNSELING:

1. Are you both willing to fill out this confidential and detailed pre-marital counseling form and participate in a session with the pastor to discuss the information on these forms? ( ) No ( ) Yes

2. If a wedding date is approved, are you willing to go through at least 6 pre-marital counseling sessions with a pastor (of your choice), counselor, or leader in the church? ( ) No ( ) Yes

3. Is your desired wedding date at least 6 months or more from today? ( ) No ( ) Yes

4. Are you currently living separately until you are married? ( ) No ( ) Yes
   *If no, are you willing to live separately until married? ( ) No ( ) Yes

5. Are you currently refraining from having sex or sexual involvement until your wedding night? ( ) No ( ) Yes
   *If no, are you willing to refrain until married? ( ) No ( ) Yes

*In order to enter into a God-honoring Christian marriage relationship, if you are currently living together AND/OR are sexually active with each other, we would ask that you agree to live separately AND/OR refrain from further sexual activity until your wedding night in order to focus your attention and energies on building a God-honoring relationship during your engagement period and a firmer foundation for your future marriage. **Note:** If you are currently living together and feel it would be too much of a financial hardship to live separately, the church is willing to try to help you find a suitable short-term affordable living situation with a person, couple or family in the church in order to assist you in preparing for marriage. The Scriptures, Christian wisdom and modern statistics show that this is good. We hope you will consider it.

If you answered YES to ALL of the above (or have already addressed any “no” responses with the pastor), we invite you to proceed with filling out and turning in this pre-marital counseling form. In order to best serve you for pre-marital pastoral counseling and/or a Christian wedding ceremony, the following practical and personal information will be extremely helpful.

If there is anything you are uncomfortable answering in writing, please leave it blank and it can be discussed on a personal basis with the pastor. Completed surveys MUST BE RECEIVED from both the man and the woman, prior to the preliminary pastoral meeting. At the close of the preliminary session, the pastor will share with you if he is willing to lead you through more pre-marital counseling visits. After the pre-marital counseling is finished, the pastor will share with you if he is willing to perform your wedding ceremony in our church. If you are seeking to use our church facility for your wedding, but have someone else who can perform the ceremony and/or pre-marital counseling, this person must be approved by the pastor. **Pre-marital counseling will cover spiritual foundations for a Christian marriage and family, temperament/personality assessments, finances and wedding plans.**

Note: Each person is to fill out their own form.
Wedding Information

1st choice of a desired wedding ceremony? Date:___________ Time: ________AM or PM

2nd choice of a desired wedding ceremony? Date:___________ Time: ________AM or PM

Who would you like to perform your wedding ceremony? □__________________________________

Who would you like to handle your pre-marital counseling? □________________________________

Where would you like your wedding ceremony to take place? □At Del Rey Church   □At the following location or church:_________________________________ in (city):_____________________________.

Personal

Name:_________________________________________ Birth Date:___________ Current Age:_________

Full address:__________________________________________________________________________

City/State:_________________________ Zip:__________________________

Home Phone:_________________________ Work Phone:_________________ Ext:________

Cell Phone:_________________________ E-mail address:___________________________

In my current housing situation, I am living...

(  ) Alone   (  ) With roommate(s)   (  ) With my parents   (  ) With my fiancée   (  ) With my children

Current Marital Status:

(  ) Single, Never Previously Married   (  ) Single, Divorced   (  ) Single, Widowed   (  ) Other:_________

If you were previously married...

On what grounds/basis did the marriage dissolve/end?

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________
If you are a Christian, what biblical passages influenced your decision for divorce?

On what date did your marriage legally terminate?__________

Is your former spouse: ( ) Still Unmarried  ( ) Remarried  ( ) Dating  ( ) Alone

Is the relationship with your former spouse: ( )Non-existent  ( )Hostile  ( )Difficult  ( )Cordial  ( )Friendly

If you are a Christian, on what biblical grounds do you believe you are free to remarry?¹

For engaged individuals who currently have children from this relationship or a previous relationship:

<table>
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<tr>
<th>First Name</th>
<th>Last Name (if different than yours)</th>
<th>Sex</th>
<th>Age</th>
<th>Grade (K-12)</th>
<th>Custody</th>
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¹ PLEASE NOTE: Not all pastors will feel free to remarry divorced persons. For some pastors it does not matter the circumstances, because of their biblical conviction that marriage is for life. We allow pastors some flexibility with their conscience before God and yet there are some circumstances that we just will not allow remarriage for, so we want to understand your view from a biblical perspective. Likewise, in the event that we disagree we hope you will understand and even consider our view. We have a high view for marriage in this church.
Employment

( ) Full-time employment as: ______________________________ Name of company: ______________________________

( ) Part-time employment as: ______________________________ Name of company: ______________________________

( ) Self-employed as: ______________________________

( ) Student at ______________________________ Will graduate (year): _____________

( ) Currently unemployed

( ) Full-time homemaker, formerly employed as a: ______________________________

( ) Retired. Formerly employed as: ______________________________ Name of company: ______________________________

( ) Other: ______________________________

Education

( ) Currently in High School  ( ) High School Graduate  ( ) Some College

( ) Tech/Trade/Community College Grad. Degree in: ______________________________ what school: ______________________________ (State: ___)

( ) College Graduate. Degree in ______________________________ from which school: ______________________________ (State: ___)

( ) Masters or Advanced Degree in: ______________________________ from which school: ______________________________ (State: ___)

( ) Doctorate in: ______________________________ from which school: ______________________________ (State: ___)

Family Background

During your growing up years, who was your primary caretaker or parent? Who raised you?

( ) Natural parents  ( ) Single parent: ( ) Mom  ( ) Dad  ( ) 1 Natural/1 step parent  ( ) Adoptive parents

( ) Relatives (relation: ______________________________)  ( ) Other (relation: ______________________________)

How many hours a day on average did you spend in meaningful conversation with your caretaker or parent?

________________________________________

How close were you to your caretaker or parent? How would you describe that relationship?

( ) Best friends  ( ) Active parent  ( ) Present physically but emotionally absent  ( ) Absent a lot  ( ) Never there

( ) Other (explain on the following line) _____________________________________________________________
How would you rate your growing up years?

Pre-School: ( ) Happy ( ) Okay ( ) Difficult
Because: __________________________________________________________

Primary School: ( ) Happy ( ) Okay ( ) Difficult
Because: __________________________________________________________

Middle School/Jr High: ( ) Happy ( ) Okay ( ) Difficult
Because: __________________________________________________________

High School: ( ) Happy ( ) Okay ( ) Difficult
Because: __________________________________________________________

College-age: ( ) Happy ( ) Okay ( ) Difficult
Because: __________________________________________________________

# of siblings: _____ In birth order, which # are you (#1 being the oldest): _____ # of brothers: _____ # of sisters: _____

If your parent(s) are still living, where are they living? (City/s, State/s): __________________________________________________________

What was the primary profession/vocation of your (dad): ________________, (mother): ________________

List up to 4 Cities/States where you lived while growing up (indicate approximate # of years in that area):

________________________________________, _______/______ yrs.
________________________________________, _______/______ yrs.
________________________________________, _______/______ yrs.
________________________________________, _______/______ yrs.

Were any of your parents or siblings?: ( ) Physically abusive ( ) Verbally abusive ( ) Sexually abusive ( ) Alcoholics ( ) Drug users ( ) None Comments: __________________________________________________________

What was the religious faith of your parents? (fill in their religious affiliation in blanks below)

Father: __________________________________________

Was he... ( ) Strong ( ) Moderate ( ) Nominal ( ) Non-existent ... in his faith practices?

Mother: __________________________________________

Was she... ( ) Strong ( ) Moderate ( ) Nominal ( ) Non-existent ... in her faith practices?
Personal Religious Background

(Religion plays an important role in people's lives and in families, hence it is helpful for our counselors to understand your background in this area. Please feel free to share).

Do you believe in God? ( ) Absolutely ( ) Yes ( ) No ( ) Unsure

If so, who do you think God is? _______________________________________________________________

What is your current religious affiliation? _______________________________________________________

What were your past religious affiliations (if any)? __________________________________________________

If you are a Christian, have you been baptized? ( ) Yes ( ) No If so, when and where? ___________________

Do you attend religious worship services? ( ) Yes ( ) No ( ) Sometimes ( ) only on holidays or special occasions

If so, where? ___________________________________________________________

( ) I started attending in (year): __________________________ If within last year, which month? ______________

How would you describe your involvement there? ( ) active leader ( ) active member ( ) member ( ) active attender ( ) casual attender ( ) frequenter on occasions ( ) repeated visitor

( ) Reason for sporadic, infrequent or non-existent attendance: __________________________________________

___________________________________________________________________________________________

My partner worship services at: _________________________________________________________________

They attend: ( ) Regularly ( ) Sometimes ( ) Special occasions ( ) Not at all

Reason for sporadic, infrequent or non-existent attendance: __________________________________________

___________________________________________________________________________________________

As a child, I grew up: ( ) Not attending religious services ( ) Attending a few times a year ( ) Attending semi-regularly ( ) Attending regularly

The 3 previous (most recent) churches where I have attended include:

<table>
<thead>
<tr>
<th>Year(s)</th>
<th>Church Name:</th>
<th>Denomination:</th>
<th>City/State:</th>
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In your opinion, what makes a church good? How do you pick a church to attend?

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

Who in your lifetime has had the greatest spiritual influence on your life? Why? How?

______________________________________________________________________________

______________________________________________________________________________

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______________________________________________________________________________

Christian Background
(This is a church and counseling is approached from a Christian context, hence it is helpful to know what (if any) Christian experiences you have had or do have.)

If you are a Christian briefly and succinctly explain what is a Christian and how you became one:

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________
If you are not a Christian let us know some more about your background...

Have you ever been exposed to the Christian religion? ( ) yes ( ) no

Have you ever read significant portions of the Bible? ( ) yes ( ) no

Are you opposed to the Christian religion? ( ) I don’t believe it, but it’s fine if you do. ( ) I don’t know ( ) Not at all, I am a Christian ( ) My partner is Christian, but I am not.

Were you raised in a Christian home? ( ) yes (they were real Christians) ( ) yes (they were Christians in name only) ( ) no (but my family went to church sometimes) ( ) no (not at all) ( ) no (my home belonged to another religion).

Were you raised in any of the following Christian splinter groups? ( ) Mormonism ( ) Jehovah Witnesses ( ) Unitarian Universalism ( ) Christian Science ( ) Word-Faith Movement ( ) the Local Church (Witness Lee) ( ) Moonies ( ) Other: _________________________

The Christian life has been described as a journey. In many ways it is. Going with the idea of a journey, where would you say you are in the journey that Christians speak of?

( )#1 - Little or no Christian background: I seldom or never attended church while growing up. I have little or no knowledge of the Bible and what it means to be a Christian.

( )#2 - Somewhat Christian: I grew up attending church on a fairly regular or occasional basis. I have a basic understanding of some of the Bible stories and consider myself to be a Christian. I have a concept of God in my life, but for the most part I live my life according to what I think or feel is best for me. If I died today, I would hope to go to heaven but I am uncertain if a person can know with 100% confidence that they will go to heaven when they die.

( )#3 - Spiritual Seeker: I feel I am at a point in my life where I have a genuine desire to have a better understanding of the Bible, Jesus Christ and the Christian faith. I am still investigating Biblical Christianity and I am open to God becoming more real to me. I have not yet fully yielded my life to Jesus Christ and I have not yet put my trust in Him to forgive all my sins. If someone asked me if I have been "born again", I would say "no" or I would not be sure what they were talking about.

The thing(s) I feel are holding me back from yielding and giving my life fully to follow and obey God are:
___________________________________________________________________________________________
___________________________________________________________________________________________

Note: The pastor/counselor will be happy to help you with spiritual questions and concerns about Christianity.

( )#4 - Backsliding Christian believer: In the past (approximate age(s): _________), I had a genuine love for God and had asked Jesus Christ to be my personal Lord and Savior. In recent years, I have been out of fellowship with the Lord, have not been active in a Bible-believing church, have not developed or maintained close Christian friendships, and have spent little or no time in the Bible.

( )#5 - New/Young/Recommitted Christian Believer: I have recently become a born-again Christian and I am excited about my new relationship with Jesus Christ OR I have been a born-again Christian for a long-time, but am only recently discovering God's deep love for me and His desire to work in and through my life.
6. **Stable/Growing Christian Believer:** I am confident of God’s active working and leading in my life. I look to Him and His word on a regular basis. I am regularly involved on a weekly basis in a Bible-believing church and I look for ways to serve the Lord and others.

7. **Mature Christian Believer:** I have a deep and consistent walk with the Lord. I am actively attending and serving on a weekly basis in a Bible-believing church. I understand my spiritual giftedness and actively use my time, gifts and resources to influence others for the Lord.

For those who checked #4, #5, #6 or #7: What do you currently do to actively maintain your relationship with the Lord?

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Del Rey Church Exposure

Have you ever been to church at Del Rey? ( ) yes ( ) no

If so,

( )I started attending Del Rey Church in (year):____________________ If within last year, which month?____

( )I attend Sunday services at Del Rey Church: ( )Regularly ( )Sometimes ( )Special occasions ( )Not at all

( )Reason for sporadic, infrequent or non-existent attendance: __________________________________________

___________________________________________________________________________________________

My fiancé or partner attends Sunday services at Del Rey Church: ( )Regularly ( )Sometimes ( )Special occasions ( ) Not at all

Reason for sporadic, infrequent or non-existent attendance:________________________________________

___________________________________________________________________________________________
Personal Issues
(Yes, we’re talking about personal stuff.... this is what counseling is about. Please be honest with yourself and this form. Honesty builds strong futures.)

How long have you known your partner?: __________________

How long have you been actively in relationship?: ________________ (Break this figure out in the below categories)
Friends: ______  Dating: ______  Serious Dating: _______  Engagement: _______  Married: ___________

How would you describe the pulse of your relationship in the last 2 months:

( ) Heaven on earth  ( ) Happy  ( ) Okay  ( ) Rocky - up & down  ( ) Very Difficult

Because: ________________________________________________________

How would you describe the pulse of your relationship in the last 6 months:  ( ) Heaven on earth  ( ) Happy  ( ) Good  ( ) Okay  ( ) Rocky - up & down  ( ) Very Difficult

Because: ________________________________________________________

How would you describe the pulse of your relationship overall:  ( ) Heaven on earth  ( ) Happy  ( ) Good  ( ) Okay  ( ) Rocky - up & down  ( ) Very Difficult

Because: ________________________________________________________

How do your parents feel about your marriage to your fiancée?: ( ) Excited  ( ) Accepting  ( ) Not sure  ( ) Indifferent  ( ) Questioning  ( ) Against

How do your future in-laws feel about your marriage to your fiancée?: ( ) Excited  ( ) Accepting  ( ) Not sure  ( ) Indifferent  ( ) Questioning  ( ) Against

How do your 1-3 closest personal friends feel about your marriage to your fiancée?: ( ) Excited  ( ) Accepting  ( ) Not sure  ( ) Indifferent  ( ) Questioning  ( ) Against

Have you ever taken any temperament/personality tests to see how you compare/contrast to your fiancée’s / partner’s temperament/personality?

( ) No  ( ) Yes -- (If you know, what was the name of the test assessment you took?:
________________________________________________________)

How would you describe your sexual relationship together up until this point?: (mark all that apply)

( ) Saving ourselves sexually for marriage [If married, we saved ourselves for marriage].  ( ) Physically involved but we haven’t had sex yet.  ( ) The farthest we go physically/sexually is kissing  ( ) We kiss and have felt each other’s privates (including rear)  ( ) We are physical but we haven’t had sex  ( ) We haven’t had sex, but I have seen him/her naked  ( ) Physically/sexually involved with each other, but we plan to stop until married.  ( ) Physically/sexually involved with each other  ( ) Have lived or are currently living together.  ( ) The sex is good.  ( ) The sex could be better.  ( ) The sex should happen more often.  ( ) Our sex life is dysfunctional.  ( ) My partner has sexual problems or concerns.
Have you ever had sex before? ( ) No ( ) Yes If so, when was the last time? ____________________________

Have you ever been abused sexually? ( ) No ( ) Yes ( ) Sort of

Are you afraid of sex? ( ) No ( ) Yes ( ) Sort of

Have you ever had any homosexual experiences? ( ) None ( ) One time in the past. ( ) Some encounters in the past. ( ) Numerous encounters in the past ( ) Currently involved. ( ) If the opportunity arose, I would consider it.

Have you ever been involved in group sex? ( ) Never ( ) One time in the past. ( ) Some encounters in the past. ( ) Numerous encounters in the past ( ) Currently involved. ( ) If the opportunity arose, I would consider it.

Have you ever seen pornography (of any kind)? ( ) Never ( ) Once in the past. ( ) Sometimes in the past. ( ) Numerous times in the past ( ) Every once in a while ( ) Currently I watch pornography. ( ) I watch with my partner.

Are there any secrets you are holding in and you feel that if your partner found out, you would be afraid that it might hurt your relationship? ( ) No ( ) Yes If yes, are you willing to discuss this during the pre-marital counseling session? ( ) Yes ( ) No

MENTAL HEALTH

Have you ever been to counseling? ( ) No ( ) Yes. If so, for:__________________________________________

Have you ever been diagnosed with a emotional issue or mental illness? ( ) No ( ) Yes. If so, what?

_________________________________________________________________________________________________

Have you ever been treated for depression? ( ) No ( ) Yes. Year(s) treated:__________________________

Do you wonder if you have depression? ( ) No ( ) Yes ( ) Maybe

Have you ever attempted suicide? ( ) No ( ) Yes. Year:_____________________________________________

Have you ever...? ( ) Used drugs (type/s:________________________________________________________) ( ) Had a drinking problem ( ) Been accused of having a drinking problem ( ) Been arrested ( ) Been in jail ( ) None of these

RELATIONSHIP INFO.

Have you ever...? ( ) Prayed aloud together ( ) Read/discussed the Bible together ( ) Attended a Bible study group together ( ) None of these

Have you discussed in detail the issue of children (timing of children and the number of children you desire)? ( ) No ( ) Yes

In the past, when I have gotten in disagreements or arguments with a loved one or family member, I have:

( ) Screamed ( ) Clammed up and refused to talk ( ) Covered up my true feeling ( ) Lied about my feelings ( ) Blamed everything on the other person ( ) Gave the person the silent treatment for ______ hours OR ______ days ( ) Punched them ( ) Hurt them ( ) Promised to get even ( ) Called them bad names ( ) Flew into a rage ( ) Threw things or broke things ( ) Pouted ( ) Prayed with them about the problem/issue ( ) Gotten a 3rd party to help us work through the problem/issue ( ) Calmed myself down so the problem could be discussed
and resolved ( )Brought up old issues from the past ( )Walked out of the room ( )Slammed doors ( )Left the house mad ( )Got drunk ( )Went shopping

Are there any significant health problems you are bringing into the marriage? ( )No ( )Yes. Explain:

___________________________________________________________________________________________

Are there any financial debts that you bring into the marriage?

( )Student loans of $_________ ( )Unpaid credit card bills of $_________ ( )Unpaid medical bills of $_________

( )Personal or family loans of $_________ ( )Monthly car payment of $_________ ( )Mortgage of $_________

( )Other debts/loans of $_________ for ____________________: $_________ for ____________________

Check any and all words that describe your financial attitudes and habits:

( )Spender ( )Shopper ( )Saver ( )Out of control ( )Orderly ( )In debt ( )Spend less than I make

( )Spend more than I make ( )Pack rat ( )Throw out or give away what I'm not using ( )Generous

( )Tither ( )Extravagant ( )Parents spoiled me ( )Parents deprived me ( )Parents trained me in financial matters ( )My family argued about money issues ( )Greedy ( )Simple pleasures/tastes ( )Rich

pleasures/tastes ( )Tight ( )Investor ( )Financially clueless ( )Operate on a budget-spending-savings plan ( )Live for the moment ( )Impulsive shopper ( )Careful shopper ( )Bargain hunter ( )Thrifty ( )I have more

month than money ( )I have money in the bank ( )Have attended a Bible Study or Christian seminar on financial matters ( )Garage sale & thrift store shopper ( )Ebay shopper ( )On-line shopper ( )Walmart or K-Mart

shopper ( )Boutiques or department store shopper ( )Compare prices ( )Don't even notice prices

Have you and your fiancée worked together to develop a written household income/spending plan for your new marriage? ( )Yes ( )No

Are there any fears, concerns or apprehensions you currently have about your partner or your relationship?

( )No ( )Yes. Item(s):

___________________________________________________________________________________________

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13
What do you hope counseling will accomplish for you?

____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________

How can I pray for you as an individual and as a couple?

____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________


STATEMENT OF UNDERSTANDING
(CONSENT FORM FOR BIBLICAL COUNSELING)

I understand that the Del Rey Hills Church (hereinafter, "DRHC") provides a free counseling service (the “Service”) as part of its commitment to serving its community. I understand that the Service is provided by both paid clergy members of DHRC and volunteers acting within their capacity to represent DRHC (collectively, “Counselors”). I have been informed and understand that the Counselors are not employed by DRHC as clinical, professional or licensed counselors, therapists, medical or psychological practitioners.

I fully understand that the Counselors are encouragers in the Christian faith, whose sole purpose in participating in the Service is to enable myself and other individuals to assume and fulfill our responsibilities before God according to the Bible, Christian principles and theology and the doctrinal principals followed by our local church and denomination, the Evangelical Free Church of America.

I understand that the Counselors and/or other representatives of DRHC may have a legal obligation to intervene, take action and report to necessary authorities any suspicion that my actions or behavior may endanger either myself or another individual, especially a child (under the age of 18) or an elder (over 65). Should such an obligation arise, I understand that DRHC will so act in accordance with that obligation.

I warrant that the Counselors have not advised (and understand that they will not advise) that I alter any prescription medication I am currently taking. This is a matter between myself and my physician.

I have voluntarily sought out the Service and understand that I am free to leave at any time. As the Service is free, I understand that I am under no financial obligation whatsoever.

I understand that this statement of understanding (the “Statement”) represents the entire agreement between myself and DRHC governing the Service. I acknowledge that the Counselors have not made any representations, promises or inducements to me not contained herein. I understand that any other agreement, statement or promise, whether oral or otherwise, not specifically contained in this Statement, shall not be valid or binding. I am aware of my right to ask for clarification of any part of this Statement.

This Statement shall be construed in accordance with the terms of its performance governed by the laws of the State of California. In case any one or more of the provisions contained in this Statement shall for any reason be held to be invalid, illegal or unenforceable, in any respect, such invalidity, illegality or unenforceability shall not affect any other provisions hereof, and this Statement shall be construed as if such invalid, illegal or unenforceable provision had never been contained herein.

This is a legally binding document that I have read and understand. By my signature below, I warrant that I have carefully read this Statement, fully understand the contents thereof, and hereby agree to be bound by the terms of this Statement.

Signature of consent: ____________________________ Date: ______________

Witness: ______________________________________ Date: _____________

(please print)

Name: ____________________________ D.O.B.: ______________

Address: ____________________________ Home phone: _______________

City: ____________________________ State: ______ Zip: ________ Email: ____________________________

15
Preliminary meeting by Pastor on ___/___/____  
Name:________________________

Approved for a wedding ceremony at our church on ___/___/____ at ____am/pm to be officiating 
by: _________________________ (phone number:__________).

Pre-marital counseling is to take place by: _________________________ (phone
number:____________________)

Mailing address:_________________________________________________

Tentative dates for pre-marital counseling would be:
______________________________________________________________

OR the following alternative steps are recommended:
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

______________________________________________________________