

Received in office:
Action:

APPLICATION FOR A SOZO MINISTRY SESSION

Na	Name: Date: _	Male	Female 🗆		
Εm	Email: Ph	one:			
Но	How did you hear about the OCC Sozo Ministry?				
TIMES YOU ARE AVAILABLE FOR A SOZO SESSION					
	Monday starting at 5:00pm ☐ 5:30pm ☐ or 6:00pm ☐				
	Wednesday starting at 10:00am ☐ or 11:00am ☐				
	Thursday starting at 10:00am ☐ or 11:00am ☐				
	Saturday starting at 9:00am				
SPIRITUAL, PHYSICAL AND EMOTIONAL HEALTH INFORMATION (Check those that apply)					
	Can you claim Jesus as your Lord and Savior? Yes \square No \square Not Sure \square				
	I am uncertain about God but want to know more.				
	I regularly attend church. (If so, where):	Member	? Yes 🗆 No 🗖		
	I am in a Life Group Yes 🗆 No 🗆				
	My parents are still living $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$	s No 🗆			
	My siblings are still living Yes ☐ No ☐ N/A ☐				
	PLEASE HELP US BY ANSWERING THE FO	OLLOWING QUESTIONS	:		
1.	Why are you requesting a Sozo session?				
2.	2. How do you hear from God (audible voice, thoughts, feelings, through	n Bible reading, etc.)?			
3.	3. Are there any fears you are currently struggling with?				
4.	4. What are you expecting from a Sozo session?				

<u>Sozo Appointment Cancellation</u>: Call 425-351-0869 at least three hours before your **Evening** or **Weekday** appointment and 24 hours prior to **Weekend** appointments if you are unable to keep the appointment. Cancellations without proper notification may forfeit rescheduling. The Sozo ministry does not charge for its services.

What happens next: The Sozo Coordinator will create a file with your Sozo application, match you with an appropriate Sozo team and contact you as soon as possible. If you have not been contacted within a few days of submitting your application, please call Mark and Leslie Hicks at 425-316-8238.