

FAITH FELLOWSHIP COMMUNITY CHURCH CHRISTIAN COUNSELING MINISTRY INFORMED CONSENT AND RELEASE OF LIABILITY AGREEMENT

I, understantakes responsibility for any of my medical, ment understand that such is beyond the scope of an Ministry.	al, or emotional condit	•
I understand that my counseling records are to Pastor of Faith Fellowship Community Church unless I become a serious threat to myself or oth	(FFCC), except where	
I understand that in consideration of the benefit Ministry, I hereby release, remise, forever disch the Christian Counseling Ministry, or any volunt causes of action, of whatever kind and nature, re	narge, and covenant no teers of this Ministry, fo	t to sue or hold legally liable FFCC, or any claims, demands, actions, or
I understand that any records generated in conf are deemed confidential records that belong to at any time have to seek or use, these, or any ot Additionally, I waive any and all rights I may a Pastor, any Lay Counselor, or anyone else involv	the pastoral care minis ther record of FFCC, as one at any time have to co	etry. I waive any and all rights I may evidence in any judicial proceeding. Impel the testimony of the Senior
I understand that an issue that I am working on beyond the scope of services provided by the C necessary to terminate my services so that I can health care providers. I understand that the lay or health care professionals. Seeking such pastcunderstand that if a lay counselor does provid only as a suggestion or recommendation, but r with seeking the services of pastoral or clinical c employees, and volunteers from any claims, da account of my participation in, or because of, the	Christian Counseling Minseek appropriate assist counselors are not obloral or professional carde a referral, that such not a requirement. I persounseling. I hereby relemage, or liability of an	nistry. In such instances, it may be tance from pastoral or professional igated to make referrals to pastors is my sole responsibility. I further referral may be considered by me ersonally assume all risk associated ease FFCC, its clergy, lay counselors,
I understand that if any provision or part of thi found to be invalid or void as against public remainder of this agreement shall remain in full	policy or by any cou	· -
I have read the proceeding agreement and agree	e to the conditions and	policies stated herein.
Name:,	, Participant	Date
Name:,	, Counselor	Date
Name	Camian Dantan	Deta

Faith Fellowship Community Church Dr. Melvin G. Barney, Esq., Senior Pastor 5937 Watt Avenue ~ North Highlands, CA 95660 916.339-9156 (Office) ~ 916.339-9005 (Facsimile)