

Pre-Deliverance Form 2024

Form Instructions:

Please fill of the Pre-Deliverance History form to prepare the deliverance team for their session with you. Write "N/A" (Not Applicable) in any area that does not apply to you. Put an "X" beside the Yes or No. Please sign the Liability Release at the bottom of the form. All information that you provide is strictly confidential and will be viewed only by the individual(s) involved in personal ministry with you.

Today's Date: _____

Your Name: _____

Spouse's Name: _____

Address: _____

Phone: _____

Email: _____

Prior Marriages: Yes ____ No ____ N/A ____

If yes, how many: _____

Names of children and ages: _____

Date of Birth: _____

Are you the first born? Yes ____ No ____

Are you a born-again Christian? Yes ____ No ____

Where and approximately what age were you born again? _____

Best Time to Meet: Week Days ____ Week Nights ____ Weekends ____

The purpose of this form is to help determine possible entryways for evil spirits...obviously, generational/ancestral permission as forewarned in Exodus 20:5 is a possibility in anyone's life. There are 30 ancestors in your history that could have passed a spirit on to you, likely, you only know about your parents and each of their two parents.

Please give any information that the Holy Spirit brings to your mind. Examples would be involvement with the occult, sexual perversion, alcoholism, depression or mental disorders, lots of divorce(s), adultery, anger, criminal activity, births out of wedlock, involvement in groups such as Masonry, Eastern Star, Rainbow Girls,

Oddfellows and Rebecca Lodge etc.

If yes, to any of the questions, please explain. It is not necessary to go into great detail with any of your responses. Ask the Holy Spirit to show you any area of concern.

1. Are you aware of ancestor involvement in any of these mentioned above?

Yes ____ No ____

2. From birth and your early childhood: Are you aware of any trauma you might have experienced during your mother's pregnancy? Accidents, divorce, spoken words such as "We shouldn't be having this child", etc.?

Yes ____ No ____

3. Do you recall any early childhood fears, injuries, or nightmares? Do you remember seeing things in your room or feeling an evil presence? Do you recall any encounters of a supernatural kind?

Yes ____ No ____

4. Any sexual abuse, or sexual embarrassment through childhood?

Yes ____ No ____

5. Do you recall any spoken words from parents, or others that were condemnation: "You're fat, you're stupid, you'll never amount to anything, you always mess up, I don't know why we had you!" "You can't be in our group." etc. embarrassing or humiliating experiences at school or from schoolteacher?

Yes ____ No ____

6. Any physical abuse from parents, family members or others?

Yes ____ No ____

7. Involvement (however innocently it may have been) with Ouija Boards, Magic 8 Ball, levitation games, seances, fortune tellers, tarot cards, astrology, horoscopes, fascination with books about magic, physics, seers, Harry Potter books, Pokemon cards, etc.? Yes ____ No ____

8. Please list accidents or injuries that come to your mind as being frightening to you at the time:

9. Please list surgeries and approximate age:

10. List Movies or TV programs that were particularly frightening to you, or specific scenes that seem to stick in your memory:

11. Have you participated in pre---marital sex? Yes ____ No ____

12. Do you have periods of, or habitual immorality? (including pornography, sexual fantasy, promiscuity, etc.)

Yes ____ No ____

13. Drinking and/or drug use? Yes ____ No ____

14. Do you experience unusual fears? Yes ____ No ____

15. What do you think may be the areas of demonic influence in your life?

16. Are (or were) there any significant problems in the home? Yes ____ No ____

17. Are your parent's divorced? Yes ____ No ____

If yes, how old were you? _____

18. Unusual feelings such as: Never really felt loved, couldn't please my father/mother, feelings of worthlessness, etc.?

Yes ____ No ____

19. Have you ever been exposed to pornography? Yes ____ No ____

If yes, how old were you? _____

20. Homosexual tendencies? Yes ____ No ____

21. Participated in college fraternities or sororities? Yes ____ No ____

22. Feelings of guilt and shame? Yes ____ No ____

23. Hopelessness? Yes ____ No ____

24. Fatigue without medical reason? Yes ____ No ____

25. Have you had an abortion? Yes ____ No ____

26. Difficulty in forgiving? Yes ____ No ____

27. Is there bitterness, anger, or unforgiveness? Yes ____ No ____

28. If so, can you forgive? Yes ____ No ____

29. Do you experience feelings of self-hate? Yes ____ No ____

30. Have you suffered from self-harm? Yes ____ No ____

31. Do you have feelings of gloom? Yes ____ No ____

32. Do you feel rejected? Yes ____ No ____

33. Do you have any objects in your home or possession that relate to ungodliness or cults, this would include new age religions, such as books about eastern deities, crystals, heavy metal music, Native American or

African artifacts, Items connected with other religions or rituals, Wiccan or other occult items, etc.?

Yes ____ No ____

Please identify as you explain.

34. Have you ever "felt" a presence in the room?

Yes ____ No ____

34a. If yes, has it been recently?

Yes ____ No ____

Please explain:

35. Do you have nightmares?

Yes ____ No ____

35a. If yes, do you hear voices?

Yes ____ No ____

Please explain. _____

36. Have you been diagnosed by a doctor as having: (list any diagnosis, diabetes, asthma hypertension, etc.?)

Yes ____ No ____

List here: _____

37. Do you have inexplicable pain...no medical explanation for it?

Yes ____ No ____

List areas in body here:

38. Do you have difficulty in trusting others?

Yes ____ No ____

39. Has there been a death of someone close to you?

Yes ____ No ____

List their name(s) and relationship to you: _____

40. Do you feel like you have any eating disorders? Yes ____ No ____

If yes, do you know when they began? _____

Please give approximate height and weight now: _____ Height _____ Weight

41. Do you suffer from sleep disorders? Yes ____ No ____

Please list: _____

42. Any other medically defined disorder? Yes ____ No ____

Please list:

43. Is there a history of tuberculosis, diabetes, ulcers, cancer, heart disease, glandular problems, asthma, other in your family?

Yes ____ No ____

Identify mother, father, and siblings:

44. Did you have imaginary friends as a child? Yes ____ No ____

List their names: _____

45. When attending Church or other ministries do you have "foul" thoughts, jealousies or other mental harassment? Yes ____ No ____

46. Do you have difficulty retaining God's Word? Yes ____ No ____

47. Difficulty in reading it? Yes ____ No ____

48. Do you have migraine headaches? Yes ____ No ____

49. Do you have any addictions? Yes ____ No ____

50. Were you ever diagnosed with a learning disability?
i.e. (A.D.D.), etc? Yes ____ No ____

51. Do you have a fear of death? Yes ____ No ____

52. Have you ever had suicidal thoughts? Yes ____ No ____

53. Has there been a period of time in your life when you were angry with God

Yes ____ No ____

54. Do you have a fear of losing your mind?

Yes ____ No ____

55. Do you suffer from anxiety or panic attacks?

Yes ____ No ____

If yes, when and how did they begin: _____

56. Do you feel incredible loneliness?

Yes ____ No ____

57. Are you plagued with doubt and unbelief?

Yes ____ No ____

58. Do you feel inferior?

Yes ____ No ____

59. Do you have thoughts of inadequacy?

Yes ____ No ____

60. Do you have obsessive thoughts?

Yes ____ No ____

61. Blasphemous thoughts?

Yes ____ No ____

62. Compulsive thoughts?

Yes ____ No ____

63. Lustful thoughts?

Yes ____ No ____

64. Do you daydream?

Yes ____ No ____

65. Are you a perfectionist?

Yes ____ No ____

66. Are things seemingly always out of order?

Yes ____ No ____

67. Do you feel the need to be in control?

Yes ____ No ____

68. Are you rebellious?

Yes ____ No ____

69. Feelings of Insecurity? (On a scale of 1---10 with 10 being worst) _____

Please explain your response:

70. Here are a few symptoms of a demonic attack, please check any symptom that applies to you:

____ A compulsive desire to blaspheme God.

____ A revulsion against the Bible, including a desire to tear it up or or destroy it.

____ Compulsive thoughts of suicide or murder.

____ Deep feelings of bitterness and hatred toward others without reason: (Jews, other races, the church, strong Christian leaders.)

____ Compulsive desires to tear other people down, even if it means lying to do so. Vicious cutting down of others by the tongue.

____ Terrifying feelings of guilt even after honest confession is made to the Lord.

____ Certain physical symptoms which may appear suddenly or leave quickly and there are no physical or physiological reason.

- ___ Choking sensations.
- ___ Pains that seem to move around and for which there is no medical cause.
- ___ Feelings of tightness about the head or eyes.
- ___ Dizziness, blackouts, or fainting seizures.
- ___ Deep depression and despondency.
- ___ Sudden surges of violent rage, uncontrollable anger, or seething feelings of hostility.
- ___ Terrifying doubt of one's salvation even though they once knew the joy of salvation.
- ___ Seizures of panic or other fear that is terrifying.
- ___ Dreams or nightmares that are of a horrific nature and often recurring.
- ___ Clairvoyant dreams that may even come true are most often demonic.
- ___ Abnormal or perverted sexual desires.
- ___ Questions and challenges to God's Word.
- ___ Sleep or eating disorders without physical cause.
- ___ Most compulsions and obsessions.
- ___ Rebellion and hatred for authority.
- ___ Bizarre terrifying thoughts that seem to come from nowhere and you cannot control them.
- ___ Fascination with the occult.
- ___ Involvement in criminal activity.
- ___ Extremely low self-image (unworthy, a failure, no good, constant undermining of self-identity).
- ___ Constant confusion in thinking (sometimes great difficulty in remembering things).
- ___ Inability to believe (even when the person wants to).
- ___ Mocking and blasphemous thoughts against preaching/teaching of the Word of God.
- ___ Perceptual distortions (perceiving anger, hostility, in others when it doesn't really exist, seeing only judgment in the scriptures.)
- ___ Horrible nightmares causing fear (often having demonic images).
- ___ Violent thoughts (suicidal, homicidal, encouraging self--abuse, etc.).
- ___ Hatred and bitterness toward others for no justifiable reason.
- ___ Tremendous hostility or fear when encountering someone involved in deliverance work.
- ___ Feelings of being watched or sensing an evil presence.
- ___ Deep depression and despondency (frequently and at significant times).
- ___ Irrational fears such as panic attacks or phobias.
- ___ Irrational anger or rage.
- ___ Irrational guilt or self-condemnation to the extreme.
- ___ Desire to do what is right but the inability to carry it out.

- ___ Sudden personality and attitude changes (severe contrasts – appears schizophrenic or Bipolar disorder).
- ___ A strong aversion toward scripture reading and prayer (especially one on one).
- ___ A dark countenance (steely or hollow look in eyes - -contraction of the pupils -- sometimes facial features contort or change -- often an inability to look at others directly).
- ___ Lying, exaggerating, or stealing compulsively (often wondering why).
- ___ Drug abuse (especially when there is demonic hallucinations).
- ___ Eating obsessions - bulimia, anorexia nervosa.
- ___ Compulsive sexual sins (especially perversions).
- ___ Irrational laughter or crying.
- ___ Irrational violence -- compulsion to hurt self and/or someone else.
- ___ Sudden speaking of a language not previously known (often an ethnic language of ancestors).
- ___ Reactions to the name and blood of Jesus Christ (verbally or through body language).
- ___ Extreme restlessness (especially in a spiritual environment).
- ___ Uncontrollable cutting and mocking tongue.
- ___ Vulgar language and actions.

Additional Comments not addressed?

Note: A few symptoms may not indicate demonic oppression...but these are very common symptoms for those under demonic attack.. After all there is really nothing to lose by doing so, except one's pride. **When in doubt ... cast them out!**

Before Coming For Deliverance: There is something you can do to help bring about your freedom. I recommend that you deal with these issues before coming for deliverance.

For the deliverance to be successful there can be **NO unforgiveness in your life**. Unforgiveness is legal permission for demons to torment believers: **Matthew 18:23-35**. (Please take the time to read.)

Do not neglect the area of forgiveness for yourself. You must also forgive yourself to be free.

A typical prayer might be as follows:

"Father, because You have forgiven me, I choose to forgive others, everyone who has hurt me, lied to me or disappointed me, I forgive. I confess unforgiveness as sin and repent of it. I receive Your forgiveness and apply it my life by forgiving myself. Thank You for Your grace and mercy in Jesus Name. Amen."

If there was ever any involvement (however innocent), in Satanic activities, witchcraft, cults or occult activities they must be renounced.

Typical prayer:

"Father, I renounce any bond, or agreement I ever made with Satan and the kingdom of darkness. I know there can be no valid contract with a liar and I renounce any words, oaths or pledges made to Satan and I choose to be totally free from them. I choose to be cleansed from any ties with Satan in Jesus Name. Amen."

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Sexual relationships outside of marriage...are called "Soul Ties" and each one could be an entry point for demon spirits. The ties must be broken by confessing them as sin and choosing to be free from them. I will include a prayer you can pray. It would be best if you could do so by denouncing each one by name, do the best you can with that. The deliverance process involves canceling permission of evil spirits to be in our life. This prayer and renunciation will cancel consent that was granted through soul ties.

The prayer can be something like this:

"Father, I confess the sin of sexual relations outside of marriage. I renounce that sinful activity in Jesus' Name. I call back that part of me that was given to another, and I refuse that part of another that may have come to me. I denounce soul ties with them and choose to be free in Jesus Christ' Name. Amen"

-----Please read and sign the disclaimer below before returning-----

I hereby acknowledge and affirm that all answers given by myself in response to the questions in this form are voluntarily submitted and that the information is true to the best of my knowledge.

I hereby release, indemnify, and forever hold harmless _____ and its agents, staff, employees and volunteers of any damages, real or perceptual, arising from personal ministry in connection with the information submitted herein.

Name:(Print): _____

Name of Parent or Legal Guardian if person filling out the form is underage of 18:

Signature: (Parent or Legal Guardian must sign if under 18 years of age)

Date: _____