



ELIJAH HOUSE S.A.
 healing hearts, changing nations
 www.elijahsa.co.za
 REG NO: 2005/005828/08
BENONI SCHOOL

in association with



Inner-City Ministry
 Jehovah-Shammah - The Lord is there
 www.innecityministry.co.za
 REG NO: 170-439 NPO

STUDENT APPLICATION

PLEASE PRINT/WRITE CLEARLY

Please complete all the required information in this document and email it back to: ehschool@innecityministry.co.za

Once you have received confirmation that you have secured a spot in the school, you may proceed with the payment of the deposit.

PAYMENT AND BANKING DETAILS

- R1,600 per person, which includes a workbook, certificate, refreshments (tea/coffee), and royalties.
 - A R400 deposit is required with the student application form (this deposit is non-refundable).
 - The remaining balance may be paid in monthly installments, with full payment due by the end of May.
- Account Holder: Inner-City Ministry
 Bank: First National Bank
 Branch: Woodbridge
 Branch Code: 250655
 Type: Cheque Account
 Account No: 62626121652
 Reference: **EH** followed by your name and surname

Title					Name	
Surname					Cell phone	
ID No.					Work phone	
Church					Postal Address	
Occupation						
Age						
Marital Status					Code	
Name of Spouse					E-mail	
RSA Citizen	YES		NO			

1. Which of the following books have you read written by John, Paula and Mark Sanford?

- | | |
|--|--|
| <input type="checkbox"/> Restoring the Christian Family | <input type="checkbox"/> Transformation of the Inner Man |
| <input type="checkbox"/> Healing the Wounded Spirit | <input type="checkbox"/> Waking the Slumbering Spirit |
| <input type="checkbox"/> Deliverance & Inner Healing | <input type="checkbox"/> Choosing Forgiveness |
| <input type="checkbox"/> Healing Victims of Sexual Abuse | <input type="checkbox"/> Renewal of the Mind |
| <input type="checkbox"/> Why Some Christians Commit Adultery | |

Books can be purchased from amazon.com or the elijahhouse.org website.





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2. What is the name of your church and how long have you been attending the church

_____. _____ Years _____ Months.

3. How long have you been a Christian? _____ Years. Date of Salvation: _____.

4. Please give a brief account of when and how you became a Christian.

5. How are you presently serving the Lord?

6. Are you presently ministering to others?

Yes (Lay/Church , Lay/Private , Professionally) No ,

If not, would you like to do prayer ministry after completing this course?

Yes No , Don't know

7. What is your primary reason for attending this school?

8. Are you currently receiving ministry or counselling? Yes No

If yes, briefly explain.





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9. Have you or are you presently taking medication for any symptoms underlined in the following statement?

Yes No If so, briefly explain.

As we are dealing with the hearts of people, the school can, at times, be very intense. Personal responses to teaching and small group interaction may include, but is certainly not limited to, some of the following: expression of anger, prejudices, resentments, apprehension, anxiety, insomnia, depression, dissociation, etc. Because of time restraints, all your personal issues will not be dealt with during the course of the school. This is a lifelong process.

However, we do give you the tools to pursue further healing, and you may want to pursue further ministry once the school is complete. If you feel, there are already significant life issues that need to be addressed; ministry or counsel prior to your enrolment in the school is advisable and always beneficial. If you have been seeing a counsellor, we ask that you discuss the school with your counsellor and receive their approval. (Signature required below).

I _____ understand that my signature below testifies that all information provided is true, and that I agree to respectfully abide by the determination of Elijah House as to the suitability of my attendance at this time. I agree to indemnify and hold Elijah House Ministry SA and any host facility harmless for any of my personal responses to the teachings and small group ministry, and for any costs in time, travel, or other incidentals, should the school be cancelled, my acceptance be delayed, or I am asked to discontinue the course to seek ministry before continuing at another time.

Applicant's signature: _____ Date: _____

Spouse's signature: _____ Date: _____
 (The signature of the spouse is necessary regardless of his/her attendance.)

Physical Address: _____

Counsellor Name (if applicable): _____ Mobile: _____

Please email this form to ehschool@innercityministry.co.za to secure your spot.

