



## CONFIDENTIAL INTAKE FORM

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These questions help inform the small group leader of your background. This form is filled out by Living Waters participants to help place participants in small groups. Please fill out the intake with as much detail as possible. Feel free to use additional pages if necessary. Your responses will be kept confidential.

Date \_\_\_\_\_ Name \_\_\_\_\_

NOTE: Please do not put the following individuals in my small group. Name(s) and reason

\_\_\_\_\_

In case of an emergency, please contact:

Name \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_

**Please describe your relationship with your family of origin.**

**Please describe any chemical dependencies in your family.**

**Please describe any significant traumatic events in your life.**

**Please describe your first sexual experience and your age at the time.**

**Please describe the most pressing sexual and/or relational problems you are facing now.**

**If married, please describe your relationship with your spouse and children.**

**At what point in your life did you consider yourself a committed Christian?**

**Describe the impact of Christ and Church upon your sexual and relational brokenness.**

**How active is your current church affiliation?**

**Please list your past affiliation(s) or religious instruction, beginning in childhood:**

**Name of church, group or school**

**From**

**To**

**Please list any negative spiritual or moral influences from your family or adult experiences that impact you today.**