

Harvest Family Church  
Counseling Informed Consent

**HFC Goal** – Our goal in providing Christian counseling is to help you meet the challenges of life in a way that will please and honor the Lord Jesus Christ and allow you to fully enjoy His love and plans for your life.

**Biblical Basis** – We believe that the Bible provides thorough guidance and instruction for faith and life. Therefore, our counseling is based on scriptural principles rather than those of secular psychology. Neither the pastoral nor the lay counselors of this church are trained or licensed as psychotherapists or mental health professionals. We seek to ‘make disciples’ as Jesus Christ commanded, and thus seek to help you in developing your relationship with Him.

**Pastoral Counseling Agreement**

In order to be fully informed about the pastoral counseling you will be receiving, please read through this following agreement, sign and date it at the bottom. This form must be signed and the intake form must be completed and returned to the church office before the first session.

*(Note to couples: Each individual should fill out their own set of forms.)*

**Description of Pastoral Counseling:**

The goal of pastoral counseling is to help an individual think biblically about their current struggles in the context of a confidential, caring environment. A pastoral counselor relies on Scripture as the sole authority for faith and conduct and recognizes that lasting change is the result of the power of God, the grace of Christ and the indwelling ministry of the Holy Spirit. Guided by biblical principles, the Counselors role is to utilize guided questioning, empathetic support, problem definition, reflection/reading assignments, encouragement, and prayer to provide wise, biblical and faithful counsel to those who are hurting and in need.

**Confidentiality** – Confidentiality is an important aspect of the counseling process, and we will carefully guard the information you entrust to us. This completed form and any pertinent information will be filed with HFC for documentation/reference purposes. There are five situations when it may be necessary for us to share certain information with others: when a counselor is uncertain of how to address a particular problem and needs to seek advice from another pastor or elder in this church; when a counselee attends another church and it is necessary to talk with his or her pastor or elders; when there is a clear indication that someone may be harmed unless others intervene; when a person persistently refuses to renounce a particular sin and it becomes necessary to seek the assistance of others in the church to encourage repentance and reconciliation; or when a crime has been committed. (see Proverbs 15:22; Proverbs 24:11; Matthew 18:15-20; Deut. 13:6-8). Please be assured that our counselors strongly prefer not to disclose personal information to others, and they will make every effort to help you find ways to resolve a problem as privately as possible.

**Resolution of Conflicts** - On rare occasions a conflict may develop between a counselor and a counselee. In order to make sure that any such conflicts will be resolved in a biblical and faithful manner, we require all of our counselees to agree that any dispute that arises with a counselor or with this church as a result of counseling will be settled by mediation and, if necessary, legally binding arbitration.

**Agreement** - By signing this consent, you agree that you will not attempt to subpoena or require any counselor to appear in any legal proceeding related to any matters discussed during counseling; nor will you attempt to subpoena any notes or records related to this counseling.

Having clarified the principles and policies of our counseling ministry, we welcome the opportunity to minister to you in the name of Christ and to be used by Him as He helps you to grow in spiritual maturity and prepares you for usefulness in His body. If you have any questions about these guidelines, please talk with the pastors or delegated personnel before your counseling appointment. If these guidelines are acceptable to you, please sign below.

Signed \_\_\_\_\_

Date \_\_\_\_\_

Witness \_\_\_\_\_

Date \_\_\_\_\_