



Samaritan Ministry Letter of Agreement

I, _____, am seeking financial assistance from Spiritual Living Center of Atlanta Samaritan Ministry. I understand that in accepting this assistance, I agree to the following:

1. I agree to attend services at The Spiritual Living Center of Atlanta with some regularity.
2. I agree to work with a Licensed Practitioner at The Spiritual Living Center of Atlanta
3. I agree to attend a minimum of 1 series of classes provided at no charge by the Samaritan Ministry at The Spiritual Living Center of Atlanta.

I understand that the purpose of these classes and counseling is to help me understand the presence and power of God as me so that I can change the consciousness that created my challenges.

I recognize the need for this teaching to assist me in moving forward to a new awareness of the possibilities available to me to overcome obstacles and recognize my potential for manifesting a better life experience.

Signature

Accepted by

Date