

Sufi Healing Order
P.O. Box 17578, Asheville NC 28816

HEALING RESOURCES INFORMATION

The Sufi Healing Order is developing its ministry in Spiritual Healing, and it would be helpful for us to know from our members what resources we have. Please fill out and return. Thank you.

Name: _____ Phone (h): _____

Address: _____ Phone (w): _____

City: _____ State: _____

Zip/Postal Code: _____ Country: _____

Email (h): _____ Email (w): _____

Sufi Healing Order: Member since _____ Currently: Active Inactive

Conductor since _____ Currently: Active Inactive

Raphaelite Work: Graduated in _____ OR Trainee since _____

1. Manner in which you offer healing services to the public:

Professional. Please specify: _____

Regular Volunteer for _____

Informal or occasional (e.g. family, friends) _____

2. Please describe your past experience in any of the above categories:

3. How might the SHO assist you in connecting with organizations &/or individuals in your community who might benefit from your services?

4. In what ways could you use your experience/expertise to help others prepare for healing service? (Please be as specific as possible.)

5. May we keep your information on file at the Sufi Healing Order and share it with others who might be interested in your work: Yes No Yes, but ask me first

6. If you are currently inactive, how could the SHO assist you in returning to a more active status, if that is your desire?

7. Other comments you might wish to make:
