



Herzen verbinden ...  
... Leben Verändern

www.elijahhouse.at

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## Application for the School of Prophecy Elijah House Austria

**Name:** \_\_\_\_\_ **Landline:** \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_  
**Street / No.:** \_\_\_\_\_ **Cellphone:** \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_  
**PLZ:** \_\_\_\_\_ **City:** \_\_\_\_\_ **Email:** \_\_\_\_\_

*Please print out well legibly and send the form to the Elijah House office*

Date of birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Occupation: \_\_\_\_\_  
single married divorced widowed remarried since: \_\_\_\_\_  
Do you have children? no yes If yes, how many? \_\_\_\_\_  
In which languages can you communicate easily German English Others

I am part of the church / fellowship: as a member as a guest

Function/field of activity: \_\_\_\_\_

I am involved in a house group / prayer group: yes no

In which context have you used your prophetic gifting?

Which seminars / training courses on the topic of Prophecy have you participated in?

What is your church's leadership's attitude towards the prophetic ministry?

Present psychological stability:

very good    5    4    3    2    1    instable

Are you or have you been in psychiatric care?    yes    no

If yes, diagnosis: \_\_\_\_\_

Do you take / did you take psychotropic drugs?    yes    no

If yes, which ones? \_\_\_\_\_

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Do you have any illnesses / handicaps we would have to consider?

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Could you participate in the worship team during the school?    yes    no

If yes, with which instrument? \_\_\_\_\_

Could you also lead worship?    yes    no

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I will look up accommodation possibilities myself under [www.elijahhouse.at](http://www.elijahhouse.at).

Please send me a list of accommodation possibilities.

I offer a ride; I allow you to share my email and telephone with participant who needs a ride

I need a ride; I allow you to share my email and telephone with participant who offers a ride

Please send me a reduction of the school fee application form.

I need private accommodation\*. (*only for exceptional cases –primarily for participant from abroad*)

I have informed my pastor/priest/cell group leader of my desire to participate in this school..

During the school we are offering lunch. Price approx. € 50.

I want to take part in the lunch

I do not want lunch

I do not know yet

With my signature I confirm the completeness and correctness of all the details stated above. All the information given in this application will be handled confidentially and may be used only by Elijah House Austria.

Place and date: \_\_\_\_\_

Signature: \_\_\_\_\_