



# Healing School Ticket

Please share as clearly as possible what you would want the Lord to do for you in this form. Send Back completed forms to the healing school email.

## Address Office:

A : 2 Murrayburn House, Westside Plaza, Edinburgh, EH14 2SP

P : +447490705326

E : healingschool@ewg-global.org.uk



## PERSONAL INFORMATION

Full Name :

  

Date of Birth :

 /  / 

Nationality :

Email :

Gender :

Married Status :

Phone :

Address:

State/Province :

Post Code :

City/Town :

Country :

Please describe the problem needing God's intervention as clear as you possibly can:

Register Signature

Officer Signature

THANK YOU FOR REGISTRATION

### MATTHEW 10:8

heal the sick, cleanse the lepers, raise the dead, cast out devils, freely ye have received, freely give.