



Agreement for In Person Ministry Training

I, _____ (name) am requesting training with Teia Martinez and staff of Teia Martinez Ministries/Healing Hearts International Ministries. I understand that I may be allowed to sit in with client appointments, attend events and schools, and be involved in social gatherings during my stay.

I plan to arrive _____ (date), and return _____ (date).

I understand that unless other arrangements have been made, my travel, transportation, lodging, food, and any other related expenses are my responsibility.

I agree that I will not purchase airfare or other transportation until this agreement has been confirmed with the ministry in writing.

I agree to sign a confidentiality agreement and volunteer application, and that no information will ever be released outside of the ministry context.

I desire to receive ministry during my stay: Yes No

I agree to the suggested donation amount that was determined, based on the length of time and hours of training I will receive.

Signature: _____ Date: _____

Name: (please print) _____ Title: _____

Ministry Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Contact Phone: (_____) _____ Email: _____

Please email form to office@teiamartinezministries.com

HHIM Colorado: 6755 Earl Dr. Ste 102, Colorado Springs, CO 80918

office@teiamartinezministries.com|719-398-1825|

HHIM Texas: txoffice@teiamartinezministries.com|281-909-7505|