

Pastor/Church Leader Recommendation & Referral



www.theravines.org

The Ravines Ministry Description

The Ravines is a Christian ministry whose focus is the restoration, healing and strengthening of the marriages of Christian couples. We believe the term "marriage" has only one meaning: the uniting of one man and one woman in a single, exclusive union, as delineated in Scripture (Genesis 2:18-25). We believe marriages can be healed, whether in immediate crisis or in need of spiritual or emotional strengthening. It is our Ministry's desire to see all Christian couples find renewal in their marriage through the power of Christ.

"He makes springs pour water into the ravines..." Psalm 104:10

Core Values

1. Marriage is a gift from God between one man and one woman, and is instituted by God.
2. Marriage is designed to be a lifetime covenant.
3. Jesus is the healer of our lives and relationships.
4. Jesus can offer hope and healing to all marriages.
5. We believe in the power of prayer.
6. We believe miracles do happen in marriage restoration.
7. We believe marriage renewal must involve spiritual growth and renewal.
8. We believe God hates divorce and that divorce is not His will for our lives.
9. We believe with humility, godly counseling and community accountability marriage can be restored and strengthened.
10. We believe an intensive time focused on healing and strengthening can provide significant growth in any marriage.

To the client: Please complete this form and give this to your pastor, elder, or someone in a position of authority in your church who is not related to you.

Date		
Client name		
Spouse		
Phone	Other phone	
Email		
Address		
City	State	Zip
Name of Church		
Address		
City	State	Zip
Date of Couples Counseling Intensive		

To the Pastor/Church Leader:

Thank you for helping us with this referral. As part of the application process at The Ravines, we ask our clients to obtain a reference from their pastor, elder, or church leader. We believe God can use The Ravines to heal marriages and we desire to partner with your church to help your marriages in crisis. We recognize this couple may not be a member of your church, but has asked for your support to pray for them and walk with them as they seek God’s healing hand on their marriage. Any information you provide will be held in strict confidence. If you have any questions or concerns, please contact Patti Jabaay, Executive Director of The Ravines @219-864.5063.

Questions:

Is the above applicant a member of your church? Yes No

How well do you know the applicant?

- Just by name and sight
- Casually, few personal contacts
- Fairly well, several personal contacts
- Very well, close pastor/leader relationship

Do you believe this applicant has an understanding of personal salvation through Jesus Christ? Yes No

From your understanding of the Ministry of The Ravines, do you feel the applicant would be a good candidate for the Couples Counseling Intensive? Yes No

Are there any concerns The Ravines Ministry should be aware of prior to this applicant attending a week at The Ravines? Yes No

If so, please explain:

I recommend this couple to attend the Ravines.

Signature date

Print name, Title contact phone #

email

Financial Support, Per Client Request:

We, _____ are requesting our church community consider supporting us financially with the over-all cost of attending The Ravines.

Church Agreement:

Our church community agrees to support the couple financially with an amount of _____.

Name:	
Church:	
Church address:	
City, State, zip	

This form must be signed before we can process the application. Thank you for your assistance.

When completed, please mail or send by email to:

Patti Jabaay
Executive Director, The Ravines
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pjabaay@wearefaith.org

www.theravines.org