**HOLY ROOD HOUSE**

 **SPIRITUAL DIRECTION/ACCOMPANIMENT**

Name.............................................................................Title........................

Address..........................................................................Post Code........................

Email address.................................................................

Tel: No: Mobile................................................................Other...............................

Date of application..........................................................

I would like to make arrangements for spiritual direction/accompaniment.

I have/have not had spiritual direction/accompaniment before.

Do you have any preference for a male or female director/accompanier?....................

Do you have any preference for an ordained minister?........................

Please tell us something of your spiritual journey and what you feel may be helpful.

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I am free for an appointment during the day on:

Mondays/Tuesdays/Wednesdays/Thursdays/Fridays/Saturdays (Please tick)

I am only free in an evening from.................................. on..................................................................................

I would like to have a residential/day visit (Please tick)

How did you hear about Holy Rood House?..............................................................