

Send completed form to:
Beatrice Birch, Director and
Laura Young, Office Manager
Inner Fire, Inc. 26 Parker Road
Brookline, VT 05345
(802) 221-8051
beatrice.innerfire@gmail.com
laura.innerfire@gmail.com

## **Application for Three Day Visit\***

Applicant Name			Date of BIrth//
Male □ Female □ Marital Status		SSN	
Address	City		State/Zip
Home Phone	Cell _		
Email:			
Applicants Primary Relationships			
Mother / Guardian's Name: Address			Emergency Contact? Y 🗆 N 🗆
Address	City		State/Zip
Home Phone		II	
Email:		_ Occupation <sub>.</sub>	
Father / Guardian's Name:			Emergency Contact? Y □ N □
Address			
Home Phone	_ •	Cell	• • • • • • • • • • • • • • • • • • • •
Email:		Occupation	
If you have a legal Guardian or Power documents indicating this for our reco Legal Guardian or Power of Attorney	rds in addition t Name	o their contac	t info below:
Address	City _		State/Zip
Home Phone		Cell	
Home Phone Email:			Emergency Contact? Y $\square$ N $\square$
Name:	Relationship	·	Emergency Contact? Y □ N
 Address	City _		State/Zip
Home Phone			
Email:			pation
☐ I authorize Inner Fire a Seeker Signature	nd its representatives to	o contact any of the	above on my behalf in case of an emergency.
Who is financially responsible for y	our stay at Inn	er Fire?	
<b>Health Insurance</b> - *Please provide a			
Health Insurance CoAddress			Phone
Address		City	State/Zip
Policy #	Group	o #	
Policy # Policy Holder	Policy	/ Holder's Dat	e of Birth//
How did you Hear about Inner Fire?			
Name		Organization	State/Zip
Address		City	State/Zip
Home Phone			
Email		Relationship	

June 15, 2020 1 of 4



deep healing without meds

Send completed form to: Beatrice Birch, Director and Laura Young, Office Manager Inner Fire, Inc. 26 Parker Road Brookline, VT 05345 (802) 221-8051 beatrice.innerfire@gmail.com laura.innerfire@gmail.com

\*To Be Completed by Applicant - If applicant is unable to complete this application, he/she may not be eligible for our

## Nutritional Assessment

Mutitional Assessment				
List any food allergies				
Food	Reaction	Intensity		
List any food intolerances/	sensitivities			
Food	Reaction	Intensity		
Describe any further dietar	y restrictions or medically pro	escribed diets to which you adhere.		
	rith disordered eating (i.e. res rience and where you are no	stricting food, binging, purging, etc.)? If so, w in relation to this struggle.		
Describe your current diet	giving examples of foods you	u eat daily and weekly.		

2 of 4 June 15, 2020



Send completed form to:
Beatrice Birch, Director and
Laura Young, Office Manager
Inner Fire, Inc. 26 Parker Road
Brookline, VT 05345
(802) 221-8051
beatrice.innerfire@gmail.com
laura.innerfire@gmail.com

What foods do you enjoy most?
What foods do you dislike?
What percentage of your food do you cook at home?
Which statement best describes your comfort level with cooking?    I don't cook   I follow the instructions on the package   I've tried cooking, but nothing comes out right   I can follow a basic recipe   I don't need a recipe, I can make a meal with whatever I have in the kitchen   Other:
What do you think will be most challenging for you around preparing food and eating at Inner Fire?
Anything else you'd like to share or personal goals you may have about diet, nutrition, food, or planning and preparing meals?

June 15, 2020 3 of 4



Send completed form to:
Beatrice Birch, Director and
Laura Young, Office Manager
Inner Fire, Inc. 26 Parker Road
Brookline, VT 05345
(802) 221-8051
beatrice.innerfire@gmail.com
laura.innerfire@gmail.com

## What to Bring

The seasons here in Vermont bring different needs, and most suggestions are perhaps obvious. Work clothes will be worn more than any dress clothes. Underlined items are not necessarily needed during the three-day visit if you do not have your own yet. Be sure to bring all other items listed for your three-day visit. Please limit clothing to one weeks worth as storage space is limited.

For Autumn and Winter  □ Long johns - 2-3 sets □ Microspikes* - 1 set □ Mittens - 1 or 2 pair □ Scarf - 1 □ Snow boots - 1 pair □ Snowshoes* - 1 set	Additionally, please bring the following:  ☐ Alarm clock (without radio) - 1 ☐ An up-to-date photo of yourself that includes your name and birthdate ☐ Any transportable instrument you have and can play ☐ **Bed linens for twin size bed (pillow cases,		
☐ Warm clothes - 1 weeks worth	sheets, blankets, comforter) 2 sets		
<ul><li>□ Warm hat - 2</li><li>□ Warm work gloves - 2 pair</li></ul>	<ul> <li>☐ Books, songs and poems to share</li> <li>☐ Enough wool yarn for knitting a scarf</li> <li>☐ Flashlight - 1</li> </ul>		
For Spring and Summer	☐ <u>Head lamp</u> - 1		
<ul><li>□ Crocs - 1 pair</li><li>□ Light clothing to layer</li></ul>	<ul><li>☐ Hot water bottle for liver compresses</li><li>☐ Journal</li></ul>		
☐ Rain boots - 1 pair	Laundry basket - 1		
□ Rain hat - 1 □ Rain jacket - 1	<ul><li>☐ Laundry detergent, biodegradable</li><li>☐ Night light if needed</li></ul>		
☐ Sandals - 1 pair ☐ Sun hat - 1 ☐ Sunscreen - 1 tube	☐ Personal toiletries (natural w/out fragrance) ☐ The book, Why on Earth by Signe Schaeffer		
☐ Swimsuit - 1 set	☐ Tick remover / key - 2		
□ <u>Umbrella</u> - 1	☐ Towels and washcloths - 2 sets		
<ul><li>☐ <u>Water shoes</u> - 1 pair</li><li>☐ Work gloves - 2 pair</li></ul>	☐ Writing and art materials: crayons and colored pencils, paper		
*As winter sets in, these are essential and enable us to get into the snowy woods which are so silent, beautiful and interlaced with wildlife tracks.  ** If a Seeker is unable to provide their bed linens, Inner Fire will provide these until such time a Seeker is able to acquire their own.  Be sure to LABEL all items with your name. We do have a lost and found to retrieve missing items.			
I understand and will bring the above needed items to Inner Fire.			
Applicant Signature	Date		

June 15, 2020 4 of 4