



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
businessmanager.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: _____ Emergency Contact? Y N
Address _____ City _____ State/Zip _____
Home Phone _____ Cell _____
Email: _____ Occupation _____

Father / Guardian's Name: _____ Emergency Contact? Y N
Address _____ City _____ State/Zip _____
Home Phone _____ Cell _____
Email: _____ Occupation _____

If you have a legal Guardian or Power of Attorney for Medical or Financial Purposes, please provide documents indicating this for our records in addition to their contact info below:

Legal Guardian or Power of Attorney Name _____
Address _____ City _____ State/Zip _____
Home Phone _____ Cell _____
Email: _____ Emergency Contact? Y N

Name: _____ Relationship _____ Emergency Contact? Y N
Address _____ City _____ State/Zip _____
Home Phone _____ Cell _____
Email: _____ Occupation _____

I authorize Inner Fire and its representatives to contact any of the above on my behalf in case of an emergency.

Seeker Signature _____

Who is financially responsible for your stay at Inner Fire? _____

Health Insurance - *Please provide a copy of your health insurance card

Health Insurance Co. _____ Phone _____
Address _____ City _____ State/Zip _____



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Policy # _____ Group # _____
Policy Holder _____ Policy Holder's Date of Birth ____/____/____

How did you Hear about Inner Fire?

Name _____ Organization _____
Address _____ City _____ State/Zip _____
Home Phone _____ Cell _____
Email _____ Relationship _____

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

Nutritional Assessment

List any food allergies

Food	Reaction	Intensity

List any food intolerances/sensitivities

Food	Reaction	Intensity

Describe any further dietary restrictions or medically prescribed diets to which you adhere.

Have you ever struggled with disordered eating (i.e. restricting food, bingeing, purging, etc.)? If so, please describe your experience and where you are now in relation to this struggle.



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Describe your current diet giving examples of foods you eat daily and weekly.

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?



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Anything else you'd like to share or personal goals you may have about diet, nutrition, food, or planning and preparing meals?

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
- Warm clothes - 1 weeks worth
- Warm hat - 2
- Warm work gloves - 2 pair

For Spring and Summer

- Crocs - 1 pair
- Light clothing to layer
- Rain boots - 1 pair

- Rain hat - 1
- Rain jacket - 1
- Sandals - 1 pair
- Sun hat - 1
- Sunscreen - 1 tube
- Swimsuit - 1 set
- Umbrella - 1 Water shoes - 1 pair
- Work gloves - 2 pair **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**



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bed (pillow cases,

sheets, blankets,

comforter) 2 sets

Books, songs and poems

to share Enough wool

yarn for knitting a scarf

Flashlight - 1 Head

lamp - 1 Hot water

bottle for liver compresses

Journal

Laundry basket - 1 Laundry detergent,
biodegradable

Night light if needed

Personal toiletries (natural w/out fragrance)

The book, *Why on Earth* by Signe

Schaeffer Tick remover / key - 2 Towels
and washcloths - 2 sets 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 _____