

Send completed form to:  
Beatrice Birch, Director  
Inner Fire, Inc. 26 Parker Road  
Brookline, VT 05345  
(802) 221-8051 ext. 1000  
[beatrice.innerfire@gmail.com](mailto:beatrice.innerfire@gmail.com)

## Application for Three Day Visit

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

**Applicant Name** \_\_\_\_\_ **Date of Birth** \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Female  Male  \_\_\_\_\_  
**Marital Status** \_\_\_\_\_ **SSN** \_\_\_\_\_  
**Address** \_\_\_\_\_  
**City** \_\_\_\_\_ **State** \_\_\_\_\_  
**Home Phone** \_\_\_\_\_ **Cell Phone** \_\_\_\_\_  
**Email** \_\_\_\_\_

### Applicant's Primary Relationships

**Mother / Guardian** \_\_\_\_\_ **Emergency Contact?** Y  N   
**Address** \_\_\_\_\_  
**City** \_\_\_\_\_ **State & Zip** \_\_\_\_\_  
**Home Phone** \_\_\_\_\_ **Cell** \_\_\_\_\_  
**Email** \_\_\_\_\_ **Occupation** \_\_\_\_\_

**Father / Guardian** \_\_\_\_\_ **Emergency Contact?** Y  N   
**Address** \_\_\_\_\_  
**City** \_\_\_\_\_ **State & Zip** \_\_\_\_\_ **Country** \_\_\_\_\_  
**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 / Power of Attorney Name** \_\_\_\_\_  
**Address** \_\_\_\_\_  
**City** \_\_\_\_\_ **State & Zip** \_\_\_\_\_  
**Home Phone** \_\_\_\_\_ **Cell Phone** \_\_\_\_\_  
**Email** \_\_\_\_\_ **Emergency Contact?** Y  N

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

**Applicant Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Who is financially responsible for your stay at Inner Fire?** \_\_\_\_\_

**Health Insurance** \*Please provide a copy of your health insurance card  
\_\_\_\_\_ **Phone** \_\_\_\_\_  
**Address** \_\_\_\_\_  
**City** \_\_\_\_\_ **State & Zip** \_\_\_\_\_ **Country** \_\_\_\_\_  
**Policy #** \_\_\_\_\_ **Group #** \_\_\_\_\_  
**Policy Holder Name** \_\_\_\_\_ **Policy Holder DoB** \_\_\_\_/\_\_\_\_/\_\_\_\_

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How did you hear about Inner Fire?

## Nutritional Assessment

List any Food Allergies:

Food	Reaction	Intensity

List any Food Intolerances/Sensitivities:

Food	Reaction	Intensity

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

What foods do you enjoy most?

What foods do you dislike?

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What percentage of your food do you cook at home?

- More than 50%     Less than 50%

Which statement best describes your comfort level with cooking?

- "I don't cook."  
 "I can 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 the biggest **challenge** for you around planning, preparing, and consuming food at Inner Fire?

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

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

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

## What to Bring

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The seasons here in Vermont bring different needs, and most suggestions are perhaps obvious. Work clothes will be worn more than any dress clothes. Be sure to bring all other items listed for your three-day visit. **Please limit clothing to one week's 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 each
- 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 each
- Up-to-Date photo of yourself that includes Name and Birthday
- Any transportable instrument you have and can play
- \*\*Bed linens for twin size bed (pillows, pillow cases, sheets, blankets, comforter) 2 sets
- Books, songs and poems to share
- Enough wool yarn for knitting a scarf
- Flashlight - 1 each
  
- Head lamp - 1 each
- Hot water bottle for liver compresses
- Journal
- Laundry basket - 1 each
- Laundry detergent, biodegradable
- Night light (if needed)
- Personal toiletries (natural–no fragrance)
- The book, *Why on Earth* by Signe Schaeffer
- Tick remover / key - 2 each
- Towels and washcloths - 2 sets
- Art materials (Crayons, 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.

\*\*\*LABEL all items with your name. We do have a Lost & Found to retrieve missing items.

***What NOT to bring:*** Please leave behind all cigarettes, smoking paraphenalia, alcohol, caffeine and stimulants, weapons, and electronic devices including phones when you visit Inner Fire.

**I understand what to bring and what to leave behind, and will bring the needed items with me to Inner Fire.**

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Applicant Signature \_\_\_\_\_

Date \_\_\_\_\_