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

Application for Three-Day Visit

To Be Completed by Applicant *- If applicant is unable to complete this application, they may not be eligible for our program. Application and auto/biographies* ***must*** *be typed in a word document, handwritten documents will not be accepted.*

- *3-Day Visits are scheduled Wednesday, Thursday and Friday on a prearranged date.*
- *The autobiography, two biographies, the 3-Day Visit application and non-refundable $1700 tuition needs to be received* ***5 days before*** *the intended visit.*
- *The 3-Day Visit Application, autobiography and 2 biographies are shared in advance of your visit with the*
- *Guides so that they have a glimmer of your past. Our intention is to then meet you in the present. Any information that you are uncomfortable sharing with the Circle of Guides should be submitted as a separate document to Beatrice Birch, Executive Director, to the email above.*
- *Please note we are a small farm community with goats, chickens, a dog & cat on site. Are you comfortable being in the presence of animals? Y_____ N_____*

Only upon acceptance to the program does an individual sleep on premise.

● Lodging: Otherland Hotel, Newfane Inn and Four Columns Inn are about 10 minutes from Inner Fire & several B & B's.
● If coming from a different time zone please arrive at least 24 hours prior to your visit in order to be rested. Please arrive by 6:45 each morning and arrange for your pick-up at 8pm.
● If your intention is to start the following Monday, please make sure the General Application is completed a week before your ideal start date.

Applicant name **Date of Birth**

☐ Female ☐ Male ☐_____Marital Status _____

Address _____

City _____ State _____ Email:_____

Home Phone_____Cell Phone _____

Applicant's Primary Relationships

Family Member / Guardian:_____Emergency Contact? Y ☐ N ☐

Address _____

City _____ State & Zip _____Email:_____

Home Phone _____Cell _____Occupation:_____

Family Member / Guardian:_____Emergency Contact? Y ☐ N ☐

Address _____

City _____ State & Zip _____ Email:___ _____

Home Phone_____Cell_____Occupation:_____

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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 _____Emergency Contact? Y ☐ N ☐

Address _____

City _____State & Zip_____Email:_____

Home Phone _____ Cell Phone _____

☐ 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 _____/_____/_____

How did you hear about Inner Fire?

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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?

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."

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☐ 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?

ANGER IS OK, VIOLENCE IS UNACCEPTABLE POLICY

Inner Fire continuously seeks to ensure a safe environment for all seekers, staff, and visitors. Inner Fire exercises a zero-tolerance policy for violence which could lead to immediate dismissal from the 3 Day Visit without a refund. Examples of violence may include, but are not limited to:

- Verbal or written threats that express intent to harm.
- Verbal assaults
- Physical assaults, when touched without permission, including biting, kicking, punching, scratching, spitting, etc.
- Any perceived act that causes fear or harm to one's self, Seeker, Guide or visitor.
- Intentional destruction of property.

Acts of violence will be assessed on a case by case basis, resulting in appropriate, immediate interventions. All cases of violence will be assessed by thorough investigation and evaluation of the circumstances surrounding the violent event. Inner Fire reserves the right to contact parents/guardians of the offender in the event of a violent episode. This process is intended to help Inner Fire determine what can be done to prevent the same, or similar events from recurring and maintaining a safe environment for all.

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VIOLENCE DISCLOSURE

As tapering can be traumatic, and individuals may not always be in control of their feelings, we understand there is the possibility of expressed anger and violent situations. We acknowledge that anger is blocked creative energy which when claimed and redirected can support deep healing. Transparency is essential in our mutual intention to support the seeker in their healing journey. In order for us to work more consciously with the striving individual, it is essential that we know of any violence (including self-harm) that has been part of a Seeker's history. Full disclosure of any past violent episodes enables us to provide proper support and be fully prepared to work through incidents that may arise in a manner that is safe for all.

Violent Episode Self-Disclosure

Describe all incidents in which you have behaved violently, or in a way that was harmful to yourself or others (including running away, cutting, overdosing, etc.). Share what led you to respond this way, how you dealt with the results and how you are working to prevent a recurrence of the violence. You may write in a separate attached document if needed. Your signature reflects your full disclosure of any and all violent episodes you recall.

_____

_____

_____

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_____

_____

_____

_____

_____

_____

_____

Applicant's Signature _____ Date _____

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Parent / Guardian Disclosure of Applicant's Violent Behavior, If Any

We ask each parent / guardian / spouse who wrote a biography on the applicant, to document below any and all episodes in which the applicant behaved violently or in a way that was harmful to themselves or others (including running away, cutting, overdosing). Include circumstances leading up to each episode, and anything that may have triggered them. Share any steps taken to deal with the situation and what was done to help prevent a recurrence. If you need more space, you may submit an additional page with as much detail as possible. By signing below, you acknowledge your full disclosure of all violent episodes in which the applicant has been involved of which you are aware.

Signature_____ Date _____

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Before coming for your 3 Day Visit, we would like to be reassured about your genuine interest in engaging in the Inner Fire, proactive program and thereby actively working toward reclaiming your life.

Please acknowledge with your initials which of the following applies to you:

_____ I am very serious about my healing journey and want to engage in the Inner Fire program.

_____ My parents, friends or spouse want me to engage in the program, but I personally do not want to at this time.

_____ I think it might be a good idea, and I am open, but I will know better after my 3-Day Visit.

Perhaps you have another perspective? Please share this in the space below.

_____ _____

Signature Date

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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. 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.*

Please Note: for the 3 Day Visit "what to bring" is minimal. This list is essentially for individuals joining the year long program. For the 3 Day Visit please bring seasonal items: work gloves, boots and always indoor slippers/shoes.

For Autumn and Winter

☐ Long johns - 2-3 sets
☐ Microspikes*(we recommend Kahtula) 1 set
☐ Mittens - 1 or 2 pair
☐ Scarf - 1
☐ Snow boots - 1 pair
☐ Snowshoes* - 1 set
☐ Warm clothes - 1 week's 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)
☐ Up-to-Date photo of yourself that includes Name and Birthday
☐ Any transportable instrument you 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

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☐ Art materials (Crayons, pencils, & paper)

*As winter sets in, micro-spikes (we recommend Kahtula) for icy conditions are essential and snowshoes enable us to get into the snowy woods which are so silent, beautiful and interlaced with wildlife tracks.
***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 paraphernalia, 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.

Applicant Signature _____ Date _____