



CENTER *for* EARTH-BASED HEALING

Apply to Attend Camp Ostara Friday, March 22 to Sunday, March 24, 2019

Application Instructions: All fields are required. After completing the application, please mail to:

CEBH, 901 Pigeon Hill Rd., Roseland, VA 22967.

Application Criteria for Camp Ostara: Cisgender women 18+ years of age who identify as a survivor of any act of domestic violence that involved a family member, intimate partner, or acquaintance, including experiencing domestic violence as a child. (Please see our Inclusivity Vision Statement on our "About CEBH" page for those who do not meet these criteria).

Application Deadline: The deadline to apply is February 1, 2019.

When Will I be Notified if I am Accepted?: All applicants will be notified of their acceptance or waiting list status by February 15, 2019. In the event an accepted participant cancels and you are on the waiting list, you may be contacted and offered a space as late as the day before camp.

How Will I be Notified if I am Selected or Placed on the Waiting List?: If you are selected, we will call you at the number you provide on your application. If we are unable to reach you via phone, we will attempt to contact you one time at the email address provided on your application. If we are unable to reach you after 3 attempts, we will offer the space to another applicant. If you are placed on our waiting list, we will email you at the email address provided on your application.

Refundable Attendance Deposit: Because our programs are in high demand and are designed as a "small group" experience with only 12 spaces, we ask accepted participants to make an "attendance commitment" by making a **refundable** \$100 deposit to secure their space. The deposit will be fully refunded upon the completion of the program. In the event a person no-shows or cancels after March 15, 2019, this deposit will be forfeited. If \$100 poses a financial burden to you, we will work with you individually to prevent money from being a barrier to your participation.

First/Last Name: _____

Do you meet the application criteria listed above?

Yes, I have read and meet the application criteria.

What is your date of birth? _____

Please provide a working phone number: _____

May we leave a voicemail message at this phone number?

Yes No

Email: _____

May we email you at this email address? (only emails related to your attendance will be sent)

Yes No

What county in Virginia (or surrounding state) do you reside in? _____

Full Address: _____

Do you need any physical accommodations made on your behalf (i.e. cannot stand/walk for more than 30 minutes at a time, can't sit on the floor, etc.)?

Do you have any special dietary needs? (i.e. gluten-free, food allergies, etc.)?

Please provide the following information for your emergency contact person:
Name, relationship, phone number.

Is it safe to contact this person in case of an emergency?

Yes, it is safe. No or not always.

How did you hear about Camp Ostara?

Have you attended Camp Ostara before and if so, which year(s)?

What drew you to Camp Ostara?:

What do you hope to get out of Camp Ostara?:

Why is this the right time in your healing journey to attend Camp Ostara?

Only for campers who have attended at least once already: Would you like to be considered to serve as a Mentor?

- Yes, I would like to be considered to serve as a Mentor.
- No, I prefer to attend as a participant.

Can you provide your own transportation to/from Camp Ostara (it is held at Douthat State Park near Clifton Forge, VA)?

- Yes No Not Sure Yet

If you have transportation, are you willing to transport other participants who may live in your area to/from Camp Ostara (if needed)?

- Yes No Not Applicable To Me

If you cannot drive to Douthat State Park, can you get yourself to a meeting place to car pool with other participants in your area?

- Yes No Not Applicable To Me

Do you have questions or is there anything else we need to know about your specific needs or capabilities?

Camp ends by 5pm on Sunday. You have the option to stay for free Sunday night and depart Monday morning. Will you be staying Sunday night?

- Yes No Maybe

In order for us to begin our programming on time, all campers need to arrive between 1pm-2pm (NO LATER than 2pm) on Friday. Please indicate that you understand and are making a commitment to arrive on time.

- I understand I need to arrive no later than 2pm on Friday, and I am making a commitment to arrive on time.

To support those in recovery, Camp Ostara is a drug and alcohol-free program. Please indicate that you understand and will not bring drugs or alcohol to Camp Ostara.

- I understand and will not bring drugs or alcohol to Camp Ostara.

Camp Ostara is a firearm/weapon-free environment. Please indicate that even if you have a concealed carry permit that you will not bring your concealed weapon to Camp Ostara.

- I understand and agree not to bring my concealed weapon to Camp Ostara even if I have a concealed carry permit.

Camp Ostara is not a clinically therapeutic environment, and therefore, individuals who are actively suicidal are not appropriate for our programs. Please indicate below that you understand that if you become actively suicidal at anytime between now and when camp is offered that you will not attend camp and will notify CEBH of your cancellation if possible.

I understand and agree to notify CEBH staff of my need to cancel if I become actively suicidal between now and when camp is offered.

As an attendance commitment, accepted applicants will be asked to make a \$100 REFUNDABLE deposit to secure their space. In the event the applicant "no shows" or cancels less than 7 days before camp, the security deposit will be forfeited. (If this deposit amount poses a financial burden, we will work with you individually to prevent money from being a barrier to your participation).

I understand, that if accepted, I will be asked to make a REFUNDABLE \$100 deposit to secure my space (or another agreed upon amount).

I understand that if I am selected and I "no show" or cancel less than 7 days prior to camp, that I will forfeit my \$100 deposit.

INFORMED CONSENT: I understand that the Center for Earth-Based Healing cannot guarantee my safety because this program and its location are publicly advertised.

I understand that my safety cannot be guaranteed by the Center for Earth-Based Healing.

FOR GRANT REPORTING PURPOSES ONLY: Camp is free of charge, but if you had to pay \$1000, would you be able to attend?

Yes No Maybe, I would need time to save the money.