



Family Logistics form

Directions: Only one guardian is required to complete the Family Logistics form (pages 1-2) and Reflections Form (page 3). However, all participants are strongly encouraged to submit a “Reflections Form” to inform our clinician of individual preferences, perspectives, and intentions.

Parent/Guardian Name _____ Phone number _____

E-mail address: _____

Is it okay for us to leave a: Voicemail? ___ Yes ___ No Email? ___ Yes ___ No

Residential Address: _____

Emergency Contact Name: _____ Relationship: _____ Phone: _____

Youth information (please list all youth possibly attending workshop):

| <i>Name</i> | <i>Age</i> | <i>Residential arrangement if separate household</i> <i>(ex: With dad only / Half time with mom & dad / Weekends at mom's)</i> | <i>Identity (optional)</i> <i>(ex: pronouns, ethnicity, tribe, religion)</i> |
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Adult information (please list all adults possibly attending workshop, including adult siblings, uncles, etc):

| <i>Name, Phone, & Email address</i> | <i>Relationship</i> <i>(to Youth listed above)</i> | <i>Identity (optional)</i> <i>(ex: pronouns, ethnicity, tribe, religion)</i> | <i>Taxable Income</i> <i>(Guardians only)</i> |
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To help with logistical coordination, Inner Roads offers itinerary ideas based on the information you provide about your family and public camping/lodging options that are available on your timeline. Upon your approval, we can make reservations which are included in our cost of services up to \$100/night. We are also happy to demonstrate backcountry cooking methods and offer meal planning suggestions, and will include the food in the costs of service up to \$200/trip. Lodging or needs that exceed these costs can be accommodated via supplemental cost to your sliding-fee rate.

Please continue to the next page to provide us with information so that we may individualize these suggestions.

Family Logistics Form (cont'd)

Medical History: Please provide as much information as possible that could possibly be relevant to participating in your family's camping or cabin trip. Keep in mind that these remote settings are often at altitude (less oxygen), require some physical activity (collecting firewood, setting up tents), and are outside the boundaries of emergency medical care and phone reception. Inner Roads is happy to offer ideas for itineraries based on what you report below for family member's varying physical conditions, including settings that are ADA accessible. Parents/legal guardians have the final/legal say for what is safe for their family. **For sensitive information, or if you are unsure of another adult's health status, please contact our family clinician directly.**

For each individual listed on page 1, please write their name and relevant information in each category. Use additional pages if needed.

Allergies and Reactions: _____

Medications: _____

Dietary needs: _____

Necessary medical equipment and/or accommodations: _____

Any physical issues that are relevant to exercise or living outdoors at higher altitudes (asthma, heart murmurs, migraines, long-covid, etc)?

Mental health concerns and/or substance use:

History of physical aggression toward individuals or objects:

History of involvement with Child and Family Services (if applicable):

Additional medical or physical information you'd like us to know about:

**Please review our Liability and Payment Agreement to understand the role that Inner Roads does and does not have in the components of your trip.*

Family Workshop Goals (per person)

What experience does your family have with camping, backpacking, or staying in cabins? No experience is needed!

What kind of experience have you and/or your family had with counseling in the past? Please let us know what was particularly helpful or unhelpful.

Please briefly describe the main stressors that your family is currently facing, including events that may have prompted seeking this support:

Has your family ever experienced a significantly stressful event or period of time? Examples might include (but not limited to) the death or illness of a family member or pet, houselessness, financial insecurity, lack of adequate food, mental health crises of family members, or issues with physical safety.

What's the best part about being in your family?

What's the toughest part about being a member of your family?

Are there any dynamics or relationship patterns between members of your family that you'd like us to be aware of? This can include strong bonds, resentment, avoidance, tension, loyalty, fear, or anything else that you feel like sharing at this time.

What does substance use look like for you and for your family members?

What do physical confrontations or conflicts look like between members of your family?

How we will know when you need to take a break from tough conversations?

Application: Family Workshop with Inner Roads



What's the most important thing you want your family to get out of this retreat?

What's the most important thing YOU want to get out of this retreat?

The idea of spending family time in a forest with a therapist can sound awkward or intimidating. Please list concerns and/or fears you have when you think about joining this trip:

Is there anything else that is important to you to share with our family therapist before they join your family's trip? *(If you'd like to answer this question on our follow up phone call rather than writing it here, please write "phone call.")*

Thank you for sharing this information with us. Our family therapist will contact you ASAP.