Safe Haven

Healing Circles Application

Thank you for showing interest in our virtual healing circles; please fill this out so we can coordinate our facilitator schedules and get back to you promptly.

- 1. Name (or pseudonym). From now on, we will identify you as this:
- 2. What are your pronouns?
- 3. Briefly describe why you are interested in our virtual healing circles:
- 4. Have you participated in any support groups before?
 - . If Yes, was your experience positive or negative? briefly describe:
- 5. What made you decide to inquire about our healing circles?

The following questions are to help us find the best possible healing circle group for your individual needs so you feel safe, secure, and comfortable.

on a scale of 1 to 5 (1 Strongly Disagree and 5 being strongly agreed):

- I am interested in Healing Circle activities related to sharing art.
- I am interested in Healing Circle activities related to sharing music.
- I am interested in Healing Circle activities related to journaling.
- I am interested in Healing Circle activities related to creative writing.
- I am interested in Healing Circle activities related to poetry.
- I am interested in Healing Circle activities related to guided meditation.
- I am interested in Healing Circle activities related to tapping & relaxation skills
- I am interested in Healing Circle activities related to group discussions.
- I am comfortable discussing sex/sexuality.
- I am comfortable discussing intimacy.
- I am comfortable discussing my traumas.
- I am comfortable discussing relationships.
- I am comfortable with the idea of sharing thoughts/ideas in our Healing Circle.
- 6. Are there any demographics that are triggering for you due to past experiences or trauma?
- 7. Is there anything else you would like us to know about you or your desires for being a part of our healing circles?