

Application

GENERAL INFORMATION

Full Name (Must Contain First, Middle, Last)

Email (Required)

Date of Birth (Must Be 21 Or Over)

Phone Number

Place of Birth

Today's Date

Current Living Situation

Address

City

State

Zip

County

Please provide an Emergency contact (required)

Name

000-000-0000

Applicants are highly suggested to complete our four week intensive phase 1 program for the best chance of long term success. The cost of \$775 covers everything you will need to build a strong foundation for phase 2. Phase 2 offsite housing arrangements begin at \$125 per week. All payments are final. A separate non refundable entry fee of \$50 is required for all admissions.

Choose below:

Onsite Phase 1 Program (28 days)

Offsite Phase 2 Housing

Requested date of arrival

mm/dd/yyyy

Upon acceptance a separate \$50 admission fee must be paid in advance before a bed can be reserved. This fee should be paid on the "submit payment" page of this website to guarantee a bed. Are you prepared to reserve a bed upon acceptance? Explain.

Are you prepared to cover the full nonrefundable program cost upon admission (all costs are outlined on the "program options" page of this website)? Please explain.

Are you receiving EBT nutrition benefits, social security or disability and if so how much? Please explain.

SUBSTANCE INFORMATION

Current substance(s) used

Past substance(s) used

Previous recovery centers? YES NO

Date of last use

Have you been through a medical detox center? (CAUTION: YOU WILL BE TURNED AWAY IF YOU TEST POSITIVE FOR OPIATES or THC UPON ADMISSION) YES NO

If yes, which one(s)?

Beach House Recovery is not a healthcare facility, therefore every resident must be successfully detoxed before admission to the program and test clean upon arrival. Unfortunately, we are not equipped to treat those with a major mental health diagnosis. We do not allow ANY medication which has the potential to be abused regardless of prescription. Every prospective resident is asked to submit to a drug and alcohol test immediately prior to their admission.

HEALTH INFORMATION

How would you describe your physical health?

Any mental health conditions? YES NO

If yes, explain

Prescribed medications? YES NO

If yes, which one(s)?

Physically willing and able to work? YES NO

Explain job skills and experience

Any physical limitations? YES NO

If yes, explain

Beach House Recovery is not a medical facility and does not employ a medical staff or dispense medication. This means that you may not be accepted as a resident if you are not healthy enough to participate in all aspects of the program or require regular doctor visits. We never allow seroquel, neurontin or any potentially abused medication regardless of classification. This is not an appropriate facility for those with a serious mental health condition.

EDUCATION

Last grade completed

Can you read? YES NO

Can you write? YES NO

LEGAL INFORMATION

On probation? YES NO

How long left?

PO Name

PO Phone Number

County

Residents participate in functions that are sometimes outside of NC. You may not be accepted if you cannot leave the state.

Can you legally leave state? YES NO

Pending court dates? YES NO

If yes, what for?

Next court date

Lawyer name and number

Are you a sex offender? YES NO

Due to zoning, we are unable to accept convicted sexual offenders

VALID IDENTIFICATION IS REQUIRED TO ENTER THE PROGRAM

Do you have a valid ID in your possession? YES NO

Valid driver's license? YES NO

Do you own a vehicle you intend to bring ?

Make and Model

Do you have a social security card in your possession ? YES NO

Please provide your social security number.

Are you a convicted felon ? YES NO

What was that charge ?

FAMILY INFORMATION

Marital Status

Wife's Name

Wife's Number

How Many Children?

Children Ages

Pay court ordered child support? YES NO

Acknowledgments

Please read the following statements carefully as they are legally binding. These items must be agreed to in order to submit your application and again upon admission. In legal terms, your agreement is a digital contract. Your admission is contingent upon a negative drug screen upon arrival and any subsequent positive screen will result in immediate discharge. Due to the minimal cost of services we will not issue refunds under any circumstances. All payments are final.

I have carefully reviewed the program guidelines, understand all policies and agree to the rules, terms and conditions. I understand that BHR is not responsible for lost, stolen or abandoned property and will not guarantee storage or investigate missing items. Your possessions are your responsibility at all times.

I acknowledge I'm a guest, not a tenant, of Beach House Recovery. I will not establish legal residency, enter into a lease agreement or be promised any goods or services. As a visitor I am not entitled to an eviction notice or arbitration if discharged. I understand that false or misleading statements on my application may result in eviction. I am aware that payments are never refundable for any reason. This arrangement will never change and I agree to leave upon request.

WHY ARE YOU SEEKING TREATMENT ?

Submit

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