



APPLICATION FOR THE LIGHT OF WOMANHOOD ~ PRIESTESS OF THE FLAME
TRAINING AND INITIATION 2019

NAME _____ AGE _____ (no one under 18 years of age
can apply for this program).

ADDRESS _____

CITY _____ STATE _____

EMAIL _____ PHONE _____

Please answer the following questions as thoroughly as possible. Please limit your
answers to one or two paragraphs each. Email to:
thenewfemininemystique@gmail.com. Please put in subject: **Application**.

To register for this training please go to our webpage to send your deposit of \$200.
<http://www.thenewfemininemystique.com/priestess-training.html>

Name:

Age:

Address:

Email:

Phone:

6. What is your religious or spiritual context? Is it important to you?

7. On a scale of 1 to 10 (*10 being severe, ritual abuse or more even just one time, 0-1 being a beautiful family in a perfect world and 5 being what is accepted as normal dysfunctionality in the world.*) How would you rate your childhood and growing up in your family. . .feel free to write something about why you chose that number.

8. How much Emotional/Verbal Abuse did you experience in your family, childhood, or life? Scale of 1 to 10 (*Shaming, blaming, guilt, denigrating, yelling, criticizing, neglect of nurturing behavior*)

9. How much Physical Abuse did you experience in your family, childhood, or life? Scale of 1 to 10 (*Hitting, striking, slapping, the belt, the paddle, the brush, the whip, the branch, being thrown, being restrained, being left or neglected, lack of physical affection, being physically threatened etc.?*)

10. How much Sexual Abuse did you experience in your family or childhood, adulthood or life? Scale of 1 to 10 (*Being forced, coerced, manipulated, seduced, or shamed into giving or receiving sexual touch, conversations, things to watch, and/or intercourse etc, Limiting who we are as sexual individuals; IE. there is only way to be sexual, fantasize, design or format sexuality. Shaming around our sexuality. Our sexuality belongs to someone else. Lack of positive sexual/affectionate modeling.*)

11. How much Spiritual Abuse did you experience in your family, childhood, or life? Scale of 1 to 10. (*Being forced, coerced, manipulated or shamed into believing or adhering to beliefs that were not authentic for your spirit and/or felt wrong to you and/or being beaten, punished, or ritual abuse. Anytime you are trained away from what is most authentic for you and your soul.*)

12. Are you currently engaged in some sort of therapy? How long have you been going? What value have you gained from being in therapy?

13. What gender do you identify with and why? How would you describe yourself?

**14. How do you identify in terms of sexuality and/or what is your ideal sexuality?
Normal? Kinky? Non-Monogamous? Asexual? Something else.**

15. Do you have a woman/ or someone who you admire and look up to, perhaps a mentor and if so who are they? What qualities do you admire about them?

16. What does being a sexually empowered woman/person mean to you? What would she/you feel like and look like?

17. Where have you been a leader/teacher in your life? In what ways do you see yourself as a leader now?

18. What does it mean to you to be a modern day priestess?

19. How do you feel about becoming a leader/teacher of a new paradigm of the feminine?

20. How do you think you will make an impact on your intimate relationships, your friends, family because of this training?

21. What are your 3-5 outcomes you would like to receive from this program?

22. Are you interested in becoming a mentor for Sasse Girls working with teens age 15-18?

Thank you so much for your commitment and dedication. I will be contacting you after I have reviewed your application to discuss it.

Blessings,

Luminessa Enjara, Founder

