

FAMILY TO FAMILY OF RHODE ISLAND Registration Form



Families of people with special needs have told us that they get valuable information and support from other families who have had similar experiences. But families need easier access to each other. Thank you for helping us build a Family to Family resource network in Rhode Island!

By completing the information below, you are agreeing to act as a Family to Family resource for other families of people with special needs in Rhode Island. **The information you provide in the starred areas below (*) will be published on the Family to Family website (www.rifamilytofamily.net), in the Family Resource Directory, and linked to the RIPIN Facebook page.** You have the option to accept phone calls or e-mails from families of people with special needs. You also have the option to share your personal knowledge and experience in the areas you check on the opposite side of this form.

Please return completed forms to: Family to Family, Family Voices at the RI Parent Information Network, 1210 Pontiac Ave., Cranston, RI 02920. For more information about Family to Family of Rhode Island, call: 401-272-0101 x 139 or 800-464-3399 x139, or email: townsend@ripin.org

PLEASE PRINT:

*Name: _____ *Email: _____

Address: _____ *City: _____ State: _____ Zip: _____

*Phone: _____ *Language(s) spoken: _____

*Preferred time to be contacted by phone: ___ Day ___ Evening ___ No preference

Your family members special need, birth date, and gender (if you have more than one family member with special needs, please list each separately):

<u>* Special Need</u>	<u>* Birth Date</u>	<u>* Gender</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

*Do you belong to any groups or organizations or participate in any activities that relate to people with special needs and their families? If so, please list:

Please check those that apply:

_____ I am willing to have other families contact me by **phone** and permit Family to Family of RI to publish my phone number for this purpose.

_____ I am willing to have other families contact me by **email** and permit Family to Family of RI to publish my email address for this purpose.

How did you hear about Family To Family? _____

Signature _____ Date _____

Note: You can retract or update this information at any time by calling or emailing Family Voices at the RI Parent Information Network.

PLEASE COMPLETE REVERSE SIDE

(Do not feel that you need to be an EXPERT to check an area—just that you have some experience. Views families share with each other will be based on personal life experience and should not substitute for the advice of qualified professionals.) **I/We have some experience in the areas checked below and would welcome the chance to share those experiences with other families.**

EDUCATION:

- Early Intervention
- Navigating the transition to pre-school
- Navigating the special education system
- School inclusion
 - Elementary
 - Secondary
- Transition from school to adult life
- Accessing college and post-secondary options
- After school tutoring
 - Reading Math Other
- Hospital schooling
- Home schooling
- School bus issues
- School athletics and clubs

COMMUNITY INCLUSION:

- Child care
- After school care
- Inclusion in community recreational activities
 - for children
 - for teens
 - for adults
- Inclusion in faith communities
 - for children
 - for adults
- Respite Care
- Support groups
 - For person with disability
 - For family members
- Community safety (e.g., police ID registration, home safety tips, steps toward community independence)
 - Taking family vacations
- Registering for selective service (all males 18-25, regardless of disability)

HEALTH CARE – (including behavioral health):

- Diet and nutrition interventions
- Navigating SSI/Medicaid system
- Challenges of caring for medically fragile person
- Accessing/managing/supervising in-home supports
- Acquiring durable medical equipment (including diapers)
- Positive behavior support
- Issues of multiple disability
- Accessing dental care
- Feeding problems
- Hygiene, grooming, self-dressing
- Sexuality and/or social skills
- Grieving and loss
- Accessing specialty clinics
- Primary care physicians familiar with disabilities
- Hospital stays
- CEDARR Family Centers

EMPLOYMENT and ADULT SUPPORTS:

- Accessing meaningful employment in the community
- Working with the Office of Rehabilitation Services (ORS)
- Creative housing supports for adults with disabilities
- Living independently
- Understanding the adult DD system
- Person-directed funding

TECHNOLOGY:

- Augmentative communication
- Assistive technology for learning
- Assistive technology for independent living
- Assistive technology for the workplace

TRANSPORTATION:

- Public transit
- Specialized vans
- Adaptive driving
- Air travel (accessibility, metal detectors)

PLANNING FOR THE FUTURE:

- Alternatives to guardianship
- Special needs estate planning (wills, trusts, etc.)
- Person-centered planning
- Self-determination
- Supported decision-making

OTHER AREA(S) NOT LISTED ABOVE (please specify) _____