



Family Support Services Registration

The information parents provide below is for registry purposes only. Family Support Liaisons use the registry to make contact with families who have a child with Down syndrome and to help families connect with services in the community. Our goal is to assist families in developing a personalized support network that enables their child to integrate successfully in family, school and community life.

PERSONAL INFORMATION

My child's name is: _____ Sex: M / F DOB: _____
First/Middle/Last Name Year/Month/Day

He/She attends: _____ Circle: CBE/CSB/Private
Name of School

_____ Phone Number of School
Address of School

_____ Current Grade

My child lives with: both parents father mother legal guardian foster care

Language(s) Spoken In the Home: _____ Translator required: Yes / No

Mother: _____ Home # _____ Work # _____
First/Last Name Cell # Email

Mailing Address: _____ Postal Code: _____

Father: _____ Home # _____ Work # _____
First/Last Name Cell # Email

Mailing Address: *(IF DIFFERENT FROM ABOVE)* _____ Postal Code: _____

Guardian/Foster Family:

_____ Home # _____ Work # _____
First /Last Name Cell # Email

Mailing Address: _____ Postal Code: _____

My child's brothers and sisters are:

	Sex:	D.O.B. (year/month/day)
Name: _____	M / F _____	_____
Name: _____	M / F _____	_____
Name: _____	M / F _____	_____
Name: _____	M / F _____	_____

My family has the support of extended family close by. Check Yes or No

This year my child has participated in the following community activities:

- Art Church activities Dance Brownies, Guides or Scouts Music
- Sports _____ Other _____

This year my child is enrolled in the following programs for children with special needs:

- Between Friends Disabled Skiing Association Special Olympics
- Challenger Baseball Dolphins Swim Club Other _____



Please complete both sides...



Family Support Services

SERVICE INFORMATION

My family is presently a member in good standing of:

- ACL (Alberta Association for Community Living)
PREP Program
CDSS (Canadian Down Syndrome Society)
Ups and Downs
Other:

My child/family is presently registered with:

- Down Syndrome Clinic at ACH
Children's Link
Early Intervention Programs (0-3 yrs)
FSCD (Family Support for Children with Disabilities)
Respite Agency:
Other:

HOW CAN WE HELP?

I would appreciate receiving information about services for:

My Child:

- Education
In home support
Health
Recreational
Social
Therapy
Other

My Family:

- Parent workshops
Crisis support
Provincial/Federal Assistance
Family workshops (i.e.: sib-shops)
Family therapy/Marriage counseling
Respite services
Other

At this time a Family Support Liaison can help me with the following:

Family Support at PREP offers workshops and parent networking groups to discuss concerns that are of common interest to families who have a child with Down syndrome (e.g. advocacy, acceptance, future planning, specific medical conditions). Are you interested in attending? If yes, please include your email address so that we can send you workshop calendars.

Yes No Not at this time email address

I suggest the following topic(s):

Date:

Name:

(Please Print)

Signature: