

Registration Instructions:

- All participants must register with the Family Support Services Dept. before attending any activity. Please contact Robin Collins X117 or Helen Centrella X187 for questions regarding Recreation programs.
- Participants utilizing their Individual Service Plan budget must contact their support coordinator to have the units built into their plans and have an approved ISP and service authorization **PRIOR** to attending our Recreation programs. **Contact Helen Centrella @ x187 for assistance with ISP plans.**
- **Register online at arcocean.org** or mail completed Registration Form with payment and required documentation to:
- **The Arc, Ocean County Chapter ATTN: Sally Stoneham, 815 Cedar Bridge Avenue, Lakewood, NJ 08701**

	REOCCURRING EVENTS:	DATES:	COST:		
✓		2019	SUPPORT PROGRAM UNITS AND COST OF TICKET :	SELF-PAY COST	Total:
	ROCKY HORROR PICTURE SHOW	10/20, 10/26	12 CI, 20 miles & \$30.00	\$80.00	
	GUYS AND DOLLS	11/3, 11/10	12 CI, 50 miles, & \$38.00	\$110.00	
	DISNEY ON ICE	11/9, 11/10	16 CI, 130 miles, & \$50	\$200.00	
	MAMMA MIA!	11/17, 11/24	12 CI, 55 miles, & \$30.00	\$100.00	
	ANNIE	11/30, 12/1	12 CI, 20 miles, & \$30.00	\$80.00	
	FROZEN JR.	12/7, 12/8	8 CI, 16 miles, & \$20.00	\$60.00	
	TIS THE SEASON	12/8, 12/15	20 CI, 90 miles, & \$50.00	\$175.00	
	BROADWAY FOR THE HOLIDAYS	12/14, 12/15	10 CI, 20 miles, & \$12.00	\$60.00	
	NUTCRACKER ROCKS	12/21, 12/22	12 CI, 50 miles, & \$38.00	\$110.00	
	COOKING CLUB - SOUTH	10/2, 10/9, 10/16, 10/23, 10/30, 11/13, 11/20, 12/4, 12/11, 12/18	9 respite	\$40.00	
	BRICK THEME DANCE	10/25, 11/22, 12/13	N/A	\$20.00	
	BARNEGAT THEME DANCE	10/11, 11/15, 12/6	N/A	\$20.00	
	TUESDAY NIGHT SOCIAL	10/22, 11/26, 12/17	N/A	\$20.00	
	COOKING CLUB - NORTH	10/15, 10/29, 11/5, 11/19, 12/10	8 respite	\$40.00	
	BOWLING: North- Ocean Rollers 3:00-5:30pm South- Southern Ocean Stars 4:00-6:00pm	Ocean Rollers: Mondays September - June (Begin 9/9) Southern Ocean Stars: Mondays September - June (Begin 9/16)	Ocean Rollers: \$50.00 yearly registration fee \$3.00 per game Southern Ocean Stars: \$30.00 yearly registration fee \$7.50 for 2 games		
	Saturday Recreation Circle One: North South West	10/12, 10/19, 10/26, 11/2, 11/9, 11/16, 11/23, 12/7, 12/14	8 CI, 12 RESPITE & 40 MILES	\$84.00 (PER WEEK)	
	ONE TIME EVENTS:	DATES:	COST:		
		2019	SUPPORT PROGRAM UNITS AND COST OF TICKET :	SELF-PAY COST	Total:
	A NIGHT OF BROADWAY	10/5	12 CI, 60 miles, & \$22.00	\$100.00	
	PUMPKIN PICKING AND HAYRIDE	10/6	10 CI, 60 miles	\$65.00	
	SUNFLOWER FESTIVAL	10/13	10 CI, 60 miles	\$65.00	
	DRACULA (BALLET)	10/27	12 CI, 16 miles & \$15.00	\$60.00	
	IT'S A SHORE HOLIDAY	12/1	12 CI, 60 miles, & \$22.00	\$100.00	
	NUTCRACKER BALLET	12/21	12 CI, 16 miles, & \$15.00	\$60.00	

Participant Name: _____ Total: \$ _____

Participant Name: _____ DOB: _____

Street Address: _____ City: _____ Zip Code: _____

Guardian Name: _____ Email: _____

Guardian Phone Number: _____

DDD ID #/MIS: _____ Support Coordinator Name: _____

Support Coordination Agency: _____ SC Phone #: _____

Emergency Contact to be reached during the scheduled program or activity:

Name: _____ Phone: _____

Name: _____ Phone: _____

Photo Release Form

Print Name: _____ Date: _____

I hereby authorize The Arc, Ocean County Chapter to utilize the specified means designated below to identify me for purposes of recreation events I am giving the following permission to:

	YES	NO
Take Photograph		
Take Video		
Identify by Name		
Interview		

I realize that by giving consent, I release The Arc, Ocean County Chapter from any liability that I might have against them by reason of such photography or identification and subsequent use.

Individual Signature *Date* *Witness Signature*

If above name individual is not their own legal guardian, the legally appointed guardian must sign below

Individual Signature *Date* *Witness Signature*

MEDICATION ADMINISTRATION POLICY

In order for The Arc, Ocean County Chapter Staff to administer medication to participants during program and events, the following criteria must be met for *each medication*:

1. Current prescription for each medication to be administered. Must be current within 1 year.
2. Medication must be in pharmacy labeled packaging, blister pack, bottle box, etc. Loose medication will not be accepted by The Arc, Ocean County Chapter Staff.
3. All medication must be directly delivered to The Arc, Ocean County Chapter Staff by guardian, family member, sponsor, or direct support provider.
4. Medications to be administered during programs, events, outings must be listed below.

MEDICATION TO BE ADMINISTERED DURING PROGRAM, EVENTS, OUTINGS- PLEASE COMPLETE

MEDICATION NAME	DOSAGE	TIME	INSTRUCTIONS

Allergies: _____

Special Diet: _____

Other special needs: _____