

So...you wanna join the **GOGOS?**

We are a social group for adults (over 18) with disabilities who gather monthly for fun, friendship and folly! See our calendar of activities .

If an individual needs personal care for toileting, behaviors etc.
~you must provide that person. This is a group of volunteers
and we would welcome you too!

Once we receive your paperwork, you will go on our email reminder list!
If you do not have an email, you need to be responsible for checking in
on events as we don't have the funds for mailings! Sorry!

Need more information? Call Holly at (517)998-3097 or
drop me an email at holly@disabilityconnect.org



Mail application or drop off at disAbility Connections 409 Linden Ave Jackson MI

Date: _____ Application Type (circle one) : GOGO Applicant GOGO Volunteer

Date of Birth: _____

Name of Applicant: _____

Address: _____ City _____ Zip _____

Parent/Caregiver Name: _____

Home Phone: _____ Cell Phone: _____

Email: _____

VOLUNTEERS ARE NEEDED! I /we am/are able to volunteer Yes No

Names: _____

Emergency Info (ex: peanut allergy, seizures, bee stings, wanders etc) add more on back as needed along
with med list: (Special diets—please provide own meals/snacks) _____

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- I (GOGO) am able to swim (with Lifeguard on duty) Yes No
 - As usual— if GOGO needs personal assistance - you must provide assistant.
 - Questions? contact Holly (517) 998-3097 leave message or email at holly@disabilityconnect.org
 - Occasionally some of our events have a cost, you will be notified in advance if so.
 - IF you are applying to be a GOGO Volunteer and have any special skills you would like to share with the group please note that! Example: play guitar, artist, crafter etc. _____
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Complete paperwork—more on back.

disAbility Connections

Authorization & Release

The undersigned jointly and severally, consent and authorize disAbility Connections, their successors and assigns to use, publish, reproduce, broadcast and televise the undersigned's names, images, photograph and written or recorded statements, and to circulate the same for any and all purpose and in any manner, including publication and advertisements of all kinds of media.

The undersigned further release and agrees to indemnify disAbility Connections, their successors and assigns from any and all claims, for libel, slander, invasion of privacy or any other claim whatsoever, arising out of use of such names, images, photographs and statements.

TERMS of camp application:

- Your signature constitutes an *Independent Living Plan* and goal based upon "Community Social Participation".
- If the attending GOGO is in need of a personal attendant for issues such as behaviors, toileting, wandering, medical related issues such as seizures etc. It is the responsibility of the family or individual to provide such attendant or caregiver at all GOGO events.
- We will be prompt in pick up from GOGO events, in the event that we are unable to arrive in a timely manner, we approve disAbility Connections to procure transportation home for the individual at the expense of the family.

Print name here: _____

Signature (or guardian signature) _____

Date: _____ Phone: _____