



## APPLICATION

- Summer Camp Program (July 9<sup>th</sup> - August 3rd, 2018)**  
 **Social Skills Program for Young Adults (September-June 2x/Month)**

<b>Applicant Information</b>				
Name	Last	First	Middle	DOB
Age				Weight
				Gender
Address	Street: City, State, Zip code: County:			
Medicaid Service Coordinator	Name: Agency: Telephone:			

<b>Emergency Contact Information</b>	
Parents Names: Guardian Name: Address:  Telephone # Home: Telephone # Cell: Telephone # Work: E-mail address:	Alternate Emergency Contact Name: Relationship to Applicant: Address:  Telephone # Home: Telephone # Cell: Telephone # Work: Email address:

<b>Medical Information</b>	
Physician	
Physician Telephone	
Hospital Preference	
Diagnosis/Classification	
Current medications	
Allergies (including food)	
Toileting Abilities	
Walking and Stair Abilities	

<b>School Information</b>	
School District	
Therapy services	No/Yes Resource Room / PT / OT / Speech / Other:
Aide at school	No/Yes 1:1 / Shared / Program Aide
Grade in September	

Education/Employment			
Program		Full time	Part time
College	Courses	Full time	Part time
Employer		Full time	Part time

Behavior	
Interests/Hobbies	
Dislikes	
Triggers	
Calming Strategies/ Interventions	
Flight risk	No/Yes Explain:
Other	

**ATTENDANCE INFORMATION and COMMITMENT:**

Summer Camp requires Applicant's consistent daily attendance throughout the four week program.  
 Parents/Guardian: Initial to acknowledge this commitment. \_\_\_\_\_

Social Skills Program for Young Adults requires Applicant's consistent attendance twice per month, September - June.  
 Parents/Guardian: Initial to acknowledge this commitment. \_\_\_\_\_

\_\_\_\_\_ Date  
 Parent/Guardian Signature

Mail Application to: G&E Therapies Attention: Missy Wilson  
 236 Burts Road  
 Kirkwood, NY 13795  
 Secure Fax: 607-775-2874

- Send Application with:
- Copy of Applicant's recent immunization record
  - Copy of Applicant's Notice of Disability Determination from OPWDD with TABS number

**Contact for Summer Camp:**  
 Anne Marie Murphy  
 1-877-426-3307, Ext. 0  
[Amurphy@gandetherapies.com](mailto:Amurphy@gandetherapies.com)

**Contact for Social Skills Program for Young Adults:**  
 Ashley Maben, MSED  
 1-877-426-3307, Ext. 716  
[Amaben@gandetherapies.com](mailto:Amaben@gandetherapies.com)

*Please do not sign below until Application is reviewed annually with staff.*

\_\_\_\_\_

This information has been reviewed and updated as appropriate.

\_\_\_\_\_ Date  
 Parent/Guardian Signature

This information has been reviewed and updated as appropriate.

\_\_\_\_\_ Date  
 Parent/Guardian Signature