

Friends Gathering Respite Care Participant Enrollment Form

Christ United Methodist Church
4201 State Highway 6 South
College Station, TX 77845
979-690-4673
Friendsgathering@christ-umc.org

Date of Application: _____

Start Date: _____

Discharge Date: _____

Participant's Name: _____

Last

First

Middle Initial

Preferred Name

Date of Birth: _____ Age: _____ Sex: _____ Marital Status: S M W D

Care Giver's Name: _____

Address: _____
City State Zip

Preferred Phone: _____ Email: _____

In Case of Emergency Notify:

Name: _____ Relationship: _____

Address: _____ Home Phone: _____
Cell/Work Phone: _____

Alternate Emergency Contact Person: _____ Phone: _____

Criteria for Successful Participation

Is the above named participant:

Mobile?	Yes	No	Comment: _____
Continent?	Yes	No	Comment: _____
Able to chew and swallow?	Yes	No	Comment: _____
Able to verbalize needs?	Yes	No	Comment: _____
Prone to wandering?	Yes	No	Comment: _____
Comfortable with a group?	Yes	No	Comment: _____
Prone to violent outbursts?	Yes	No	Comment: _____

*Any changes in participant should be discussed immediately with Friends Gathering Respite Group director.

Friends Gathering Respite Care Participant Enrollment Form

Medical Information

Food/Drug/Pet Allergies: _____

Current Diagnosis: _____

Diabetic?: _____

Hospital Choice in case of Emergency: _____

Family/Social Information

Birth Place: _____ Religion: _____

Spouse: _____ Military Service: _____

Previous Occupation: _____ Education: _____

Participant Special Interests and Other Information

Likes to do: _____

Does not like to do: _____

Hobbies/Clubs: _____

Any talents (plays musical instrument, writes poetry, etc.): _____

Owens a pet? Y N What kind of pet: _____ Likes dogs? Y N

Other information you would like to tell us: _____

How did you hear about our program: _____

As a caregiver, would you be interested in attending a support group once a month during the Friends
Gathering Respite Group meeting time? Y N

Completed by (printed name)

Signature

Relationship

Date

Please return enrollment forms to Christ United Methodist Church prior to attending Friends Gathering.

We will review the needs of the persons being enrolled prior to meeting with them to ensure we can adequately meet those needs.