

**Participant Eligibility Requirements and Guidelines**

ILADD, Inc. offers programs, activities, small group outings and classes (collectively, “activities”) to adults with intellectual and developmental disabilities. The following are our Participant Guidelines. We reserve the right to change these at any time.

* Participants must be an adult (at least 18 years of age).
* Participants must submit a Participant Information Form, read and agree to the Participant Code of Conduct, and read and agree to the Release and Waiver of Liability and Emergency Medical Care Authorization and Media Release.
* Following submission of the necessary ILADD forms for participation, the self-advocate and/or caregiver will meet with the ILADD Program Manager to provide additional information with regard to necessary supports, medical or behavioral concerns and ways ILADD staff and volunteers can best meet the needs of the participant. Any information gathered will be confidential and for use only by ILADD staff and volunteers during ILADD programming.
* If a Participant needs one-on-one support for personal hygiene, medical, or behavior issues, the Participant will need to bring a caregiver with him/her to the activity. The caregiver will need to pay their own expenses while on the activity.
* ILADD staff or volunteers cannot dispense medication. Reminders to take medication independently may be permitted.
* Guidelines specific to small group outings:
* Participants must register for all outings with the Program Manager.
* Participants may choose one outing per month.
* Participants may be placed on a Wait List for any small group outing that has limited attendance or seating.
* Please cancel no less than 24 hours before the small group outing if you are unable to attend (to enable someone on the Wait List to attend).
* If a Participant fails to cancel more than 24 hours in advance of a small group outing two times in four months, the Participant may be suspended from participating for at least one month.
* Prepayment will be required for ticketed events. There will be an upcharge added to each ticket price for each Participant to pay for the staff ticket.

I have read and understand these Eligibility Requirements and Guidelines.

Printed Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If Applicable:

Printed Name of Parent/Legal Guardian:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Legal Guardian’s Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_