



*Animal-Assisted Activities For Children With Disabilities*

### Program Application

Name of Child: \_\_\_\_\_

Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Sex: \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Business: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Home Address: \_\_\_\_\_

\_\_\_\_\_

Child's Primary Physician: \_\_\_\_\_ Telephone: \_\_\_\_\_

Date of Last Tetanus: \_\_\_\_\_

Allergies: \_\_\_\_\_

Briefly describe child's diagnosis/disability: \_\_\_\_\_

\_\_\_\_\_

Is your child in school? \_\_\_\_\_ Where? \_\_\_\_\_

Working with a therapist?: \_\_\_\_\_ Where? \_\_\_\_\_ How? \_\_\_\_\_

How did you learn about The Barn? \_\_\_\_\_

1) What are your child's personal strengths? Please give examples.

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2) What are your child's preferred activities and items?

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3) Describe your child's behavior.

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4) In order to support your child, what strategies can we use?

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5) How does your child interact with any pets or animals?

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6) Are there any important things to remember when working with your child? (i.e. has a hearing deficit, does not like to get wet, is sensitive to being in the sun, etc.)

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7) Please list any medical precautions. (i.e. physical restrictions, safety equipment, positional limitation, etc.)

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8) Our animal assisted activities are developed with your personal goals in mind (**such as gross and fine motor skills, mobility, speech & language, attention, compliance, social skills, animal interaction, cognition, safety, self-regulation skills & flexibility**). How do you hope your child will benefit from activities at The Barn? Please list your top three (3) priority goals and any comments you may have so we may discuss with you, activities for your child's Barn Activity Plan (BAP), that will enhance their visits at The Barn.

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**ANY ADDITIONAL COMMENTS CAN BE ADDED HERE**

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**Signature of Parent/Guardian:** \_\_\_\_\_ **Date:** \_\_\_\_\_



### Release of Liability

This release is executed and delivered this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by \_\_\_\_\_, parent/guardian of \_\_\_\_\_ on behalf of heirs, executors, administrators, successors and assigns (collectively the "Releasor").

In consideration of being allowed to participate in any activities at The Barn at Spring Brook Farm, Inc., Releasor hereby fully releases and discharges The Barn at Spring Brook Farm, Inc., its successors and assigns (the "Releasee") from any and all rights, claims and actions which the Releasor may now have or may hereafter ever have against Releasee arising out of (name of child) \_\_\_\_\_ participation in activities at The Barn.

This Release is intended by Releasor to release any claim, damage, loss or injury suffered by Releasor, or which may be suffered by Releasor, and such rights which the releasor may now have or will have in the future against the Releasee. Releasor acknowledges that Releasor has freely and voluntarily executed and delivered this Release to the Releasee and further, that Releasor has received good, valuable and adequate consideration prior to the execution and delivery of this Release.

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Parent/Guardian

### Acceptable Conduct Policy

The Barn at Spring Brook Farm considers one of its primary functions providing an opportunity for developing independence and self-confidence through interacting with animals. Each participant must maintain acceptable standards of conduct at all times. Consequently, any conduct by a participant which the Executive Director or Staff members consider detrimental to the child's safety, the safety of other children, Staff, animals or to The Barn itself may be deemed adequate cause for disallowing the child's participation in The Barn programs.

\_\_\_\_\_

Witness

\_\_\_\_\_

Parent/Guardian

### Photo Release

I hereby give permission to The Barn at Spring Brook Farm to use any photographs or videos taken of my child \_\_\_\_\_ while at The Barn for use as promotional material, **including but not limited to**, newspapers, brochures, The Barn's web site, The Barn's facebook page and YouTube.

\_\_\_\_\_

Parent/Guardian

\_\_\_\_\_

Date

### Sharing of Information

I hereby give permission to The Barn at Spring Brook Farm to share information contained on our application and questionnaire with the volunteer who will be working with my child.

\_\_\_\_\_

Parent/Guardian

\_\_\_\_\_

Date

**I also understand that The Barn at Spring Brook Farm is not a treatment facility and does not provide a therapy plan for my child. The animal-assisted activities conducted at The Barn are for the purpose of recreation and fun. My child may, however, benefit from these activities.**

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Parent/Guardian

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Date