



## **i-Care about Music**

# **Application Form**

### **Our Goal**

It is our goal to broaden the opportunities for students with autism & other special needs, to access musical instruments. By collaborating with the Delaware Valley SD Music Dept and musicians in Pike County, we hope to provide the support and encouragement necessary for these students to learn to play an instrument. This new initiative will focus on students with disabilities, which is a historically underserved population. These families are often one-parent households or one-income families, making it difficult to afford the cost of rental or purchase of a musical instrument.

*PASS will purchase 1 one musical instrument and pay for 90 days of lessons with a mutually agreed upon teacher or Music School.*

### **Please review the following information before filling out the application.**

Applications will be reviewed in the order in which they are received.

### **What are the eligibility requirements?**

1. The Individual applying must have a developmental disability to qualify.
2. Applicant must reside in Pike County, PA.

### **What are the Restrictions and Stipulations?**

1. One Instrument per child, per Calendar year.
2. There are no age restrictions.
3. There are no income restrictions.
4. Parent/guardian must make accommodations for the applicant's travel to and from music lessons.
5. Parent/guardian must make a commitment to ensure the applicant practices music lessons at home.
6. Parent/guardian must ensure the donated instrument is cared for and away from siblings.
7. Parent/guardian must ensure their best effort is made to keep lesson appointments.
8. Parent/Guardian agrees to release photos and/or videos for PASS promotional use.
9. Pike Autism Support Services is not responsible for damage/repair or Setup of Instruments.

### **Please drop off or mail the completed application to:**

**Pike Autism Support Services**  
Milford Community House  
201 Broad Street Suite #4, Milford Pennsylvania 18337  
**Attention: i-Care about Music Application**

**Milford Community House, 201 Broad Street Suite #4, Milford Pennsylvania 18337**



# Pike Autism Support Services

Support & Advocacy for North East Pennsylvania

[www.pikeautism.org](http://www.pikeautism.org)



## i-Care about Music Application

Applicant Name: \_\_\_\_\_ Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

School: \_\_\_\_\_ Grade \_\_\_\_\_ Class: \_\_\_\_\_

Music Teacher / Person recommending: \_\_\_\_\_

I am requesting the following Instrument: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Street/City/Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Street/City/Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

Overview of Applicant's disability & challenges: \_\_\_\_\_

### Referral Information:

How did you become aware of the PASS iCare about Music Program?

\_\_\_\_\_

*The above information is freely given to process this application request. By signing, I attest that all information included is true and accurate and agree with the stated restrictions and stipulations of this application.*

PARENT/GUARDIAN SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

*The information included in this application is confidential and for the sole use of Pike Autism Support Services. Please keep a copy for your records.*

Email any questions to [info@passnepa.org](mailto:info@passnepa.org) or call 570-832-4000

| Date Approved | Approved By | Instrument | Purchased on | Vendor | Gifted on |
|---------------|-------------|------------|--------------|--------|-----------|
|               |             |            |              |        |           |

**Milford Community House, 201 Broad Street Suite #4, Milford Pennsylvania 18337**

PASS IS A 501(c)3 NON-PROFIT ORGANIZATION DEDICATED TO THE DISSEMINATION OF INFORMATION AND ADVOCACY FOR THE AUTISTIC COMMUNITY

[www.pikeautism.org](http://www.pikeautism.org)