

Variety of Illinois - Kids on the Go! - Mobility Application

INSTRUCTIONS

Variety - The Children's Charity of Illinois' "Kids on the Go" Mobility Grant Program provides families with the equipment needed to enable all children to participate in their communities & enjoy being a kid! Variety helps children with disabilities, 21 years of age & younger with disabilities by providing mobility equipment such as sport wheelchairs, adaptive car seats & strollers, adaptive bicycles, tricycles and more.

If you choose to download the PDF, please mail application with supporting documents to:

Variety the Children's Charity of Illinois

603 Rogers St.

Downers Grove, IL 60515

[312-822-0660](tel:312-822-0660)

What You Need for this Application:

The submission of an application must include the following for consideration by Variety:

- Letters of verification from the professionals you have identified who are familiar with your child's needs and who will specify the appropriate equipment for your child
- Addressing all items as stated in the Addendum for appropriate equipment being requested
- Copies of determinations from relevant insurance programs
- Equipment specifications (and two bids from suppliers)
- A recent photo of the child and signed release forms.

Date of Application

Communication/Mobility Equipment device you're requesting

Total Amount for the Equipment you're requesting

Total Amount for the Equipment from Variety you're requesting

Vendor Providing Equipment

Upload Quote from Vendor

If requesting a bike, please indicate your child's favorite color.

Child's Name

Child's Age

First

Last

Child's Birthday

Child's Height

Child's Weight

Photo of Child

Child's Ethnicity

- White (Not Hispanic or Latino/a) Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino/a)
- American Indian or Native Alaskan (Not Hispanic or Latino/a) Hispanic or Latino/a Black or African American (Not Hispanic or Latino/a) Two or More Races

Who has legal custody of the child?

Relationship to the Child

First

Last

Home or Agency where the child resides

Child's County of Residence

Address Line 1

Address Line 2

City

State

Zip Code

Parent/Guardian Email

Cell Phone

Home Phone

Work Phone

Father's Occupation and Place of Employment

Mother's Occupation and Place of Employment

Occupation and Place of Employment

Occupation and Place of Employment

Household Yearly Income

Own Home: (Please check one)

Please indicate the number of dependants in the child's family:

Fill out the following if different than legal custody information. If the same as above, leave blank.

Name of person completing application

First

Last

Relationship to Child

Address

Address Line 1

Address Line 2

City

State

Zip Code

Email

Phone

Please read and answer the next few questions, this will help us to understand WHO your child is and not just the condition they have. If you were to help educate others, what would you say about your child and their disability? What can you say to help other parents to know about your child when they meet or see them for the first time?

Medical Diagnosis/Nature of Disability:

Is child diagnosed with cognitive disabilities/developmental delays (for restrictive grants)?

Please provide at least two paragraphs that can be used for our Variety blog to educate our donors,

community, and volunteers: Share your child's story of how they are overcoming adversity and what you would like people to know about your child. Please include how this equipment will enhance your child's life, what this gift means for your family and the importance of inclusion for kids with special needs.

Describe your child's personality and what is your favorite quality is about them. Include interests and favorite activities that you enjoy together.

Has your family ever received assistance from Variety in the past?

Yes No Maybe

If yes, please list:

Would you be a part of an onsite presentation to show sponsors/donors the gift and opportunity to meet your child?

Yes No Maybe

Will you participate in free Variety events offered to your family during the year?

Yes No Maybe

What events/activities do you want to see Variety do?

Will you follow Variety on Facebook? www.facebook.com/varietyofillinois

Yes No Maybe

Will you follow Variety on Twitter? @varietyil

Yes No Maybe

Will you follow Variety on Instagram? @varietyofillinois

Yes No Maybe

Healthcare Professional

Please list the name of a healthcare professional who has worked with your child and can verify the need for a ride-on car. We will not contact these individuals without your authorization.

Name of Professional

Agency of Professional

Occupation of Professional

First

Last

Phone Number of Professional

Email of Professional

Please sign here if you consent to Variety's contacting the above named individuals to discuss your child's equipment needs:

First

Last

Has the family ever received assistance from Variety in the past?

Yes No Maybe

If so, when and in what form?

Please provide any additional information that might clarify your child's need for enabling equipment and the family's inability to obtain these items.

Any additional documents?

Release of Liability

In consideration of the receipt of certain enabling equipment awarded by Variety - The Children's Charity, (the Recipient thereof), him/herself or through his/her parent or legal guardian, hereby releases and forever discharges Variety - The Children's Charity of Illinois, Variety - The Children's Charity International, and Variety - The Children's Charity of the United States, their members, employees and officers (hereafter

collectively referred to as "Variety") from and against any and all claims, of any type, which arise from or are related to:

1. Any alleged malfunction of or defect in the enabling equipment;
2. Any allegation that the enabling equipment was not appropriate or suitable for the Recipient;
3. Any other matter, of any type, related, in any way, to the Recipient's receipt or use of the enabling equipment;
4. Any lost or stolen enabling equipment.

I (We) stipulate that the information included in this application is true to the best of my (our) knowledge. Further, I (we) understand that the presence of inaccurate information in this application could result in the need for the re-evaluation of this application on the part of Variety - The Children's Charity of Illinois.

Parent/Legal Guardian Date (Signature is required of ALL legal guardians)

Name of Second Parent/Legal Guardian:

Name of Third Parent/Legal Guardian:

Disclaimer

The mission of Variety is to help purchase enabling equipment (wheelchairs, van lifts, house ramps, adaptive car seats & strollers, specially-equipped bicycles & tricycles, stairlifts and other items) and assistive technology and communication devices for children, 21 years of age and younger. The equipment we provide carries no warranty from Variety and its use, even in the event of malfunction resulting in injury, gives rise to no liability on the part of Variety. Variety is merely a funding source. Variety is in no way responsible for reclaiming, disposing of, maintaining or repairing equipment. It is the sole responsibility of the Recipient's legal guardian(s) to maintain, repair and/or dispose of the equipment. Any other costs that may be associated with the equipment such as installation, delivery, labor, disposal, etc. that are not explicitly stated on the application are the sole responsibility of the Recipient's legal guardian(s). All installations of ramps, lifts, stair glides, electrical supplies, etc. must be in compliance with applicable building codes. Variety is in no way responsible for ensuring compliance with any codes. Before disbursement of any funds to purchase equipment, the legal guardian(s) of the Recipient must have this form signed, witnessed by a non-family member, and returned to Variety.

I am the Legal Guardian of this Child

First

Last

I have read and fully understand and agree to the above Disclaimer.

First

Last

Authorization to Use Name and Likeness

The Recipient and his/her parents or legal guardian hereby acknowledge and agree that acceptance of the enabling equipment (wheelchairs, van lifts, house ramps, adaptive car seats & strollers, specially-equipped bicycles & tricycles, stairlifts and other items) and assistive technology and communication devices from Variety may result in publicity. The Recipient and his/her parents or legal guardian hereby irrevocably authorize Variety: (a) to publicize and use the Recipient's likeness, voice and features, with or without his/her name, for any publication, promotion, trade or business use, or any other purpose; (b) to photograph, videotape, film and record each Recipient in any manner Variety chooses; (c) to copyright, convey or otherwise distribute, now or in the future, any such material involving the Recipient, his/her parents or legal guardian and that said material may be distributed to anyone, for any purpose, including the general public, magazines, newspapers, television, radio stations; (d) to publicize, now or in the future, the name of the Recipient including information regarding his/her physical condition and details regarding the enabling equipment received from Variety. The Recipient and his/her parents or legal guardian agrees that it is not necessary for Variety or anyone else to contact them prior to releasing any information authorized by this document. The Recipient and his/her parents or legal guardian hereby releases Variety from and against any and all claims, of any type, which arise from or are related to Variety's use, distribution or disclosure of any photographs, films, videotapes, electronic recording or other information regarding the Recipient and the award from Variety.

(Please note that your signature is not required on this form for the application to be considered by Variety - The Children's Charity. However, we do require photos of your child with their awarded equipment. Please note that we will only publish photos of children authorized by families signing this release form. Other photos will be kept confidential. However, these photos enhance our fundraising efforts to secure additional funding from corporate sponsors, individuals, and community foundations to help children with disabilities and to continue our programs. Thank you.)

I have read and fully understand the Disclaimer above:

First

Last