



Sunny Day Club® Participant Form

Participant's Full Name _____

Address _____

Gender: Male _____ Female _____ Date of Birth _____

Marital Status: Married _____ Single _____ Divorced _____ Widow/er _____

How did you hear about the Sunny Day Club? _____

Emergency Information:

Doctor's Name _____

Address _____ Phone # _____

Hospital Preference _____

Participant's Insurance Carrier _____

Policy # _____

Allergies _____

Do you have a pacemaker or in-dwelling defibrillator? YES NO

List all physical problems, including mental health issues and communicable diseases:

List any dietary or physical restrictions: _____

List Medications/Dosage: _____



Sunny Day Club® Participant Form

Caregiver Contact Information:

Caregiver's Name: _____ Relationship _____

Address if different from participant: _____

Phone #s: (H) _____ (C) _____ (W) _____

Email Address: _____

Alternate Contact Person: _____ Relationship _____

Address: _____

Phone #s: (H) _____ (C) _____ (W) _____

I hereby release Brentwood United Methodist Church (hereafter "BUMC"), its staff, employees, and volunteers from any liability for injury or damages suffered by the above participant during the course of the Sunny Day Club program and agree to release, indemnify and waive any rights by subrogation I may have, and hold harmless BUMC, its staff, employees, volunteers from injury or damages to the above participant. I acknowledge that BUMC cannot and does not assume responsibility for undesirable incidents or injuries should the participant leave the BUMC campus without permission.

I hereby consent and authorize the Sunny Day Club staff (paid and volunteer) to obtain emergency medical treatment for the above participant in the case of injury or illness upon presentation of this authorization or photocopy thereof.

I understand that every reasonable effort will be made to ensure the safety of the Participant.

PLEASE NOTE THAT IT IS THE RESPONSIBILITY OF EACH PARTICIPANT AND GUARDIAN TO UPDATE THIS INFORMATION AS THE NEED ARISES.

Participant Signature

Date

Guardian Signature

Date



Sunny Day Club Interest Profile

Name: _____ Date: _____

Name Participant likes to be called: _____

Family History (marital history, number and names of children, where they live, and other important relationships): _____

Friends/Pets: _____

Childhood History (Place of birth, info on parents, nationality, languages spoken, experiences, pastimes, etc): _____

Education/Former Occupations (Years of work, what they enjoyed): _____



Sunny Day Club Interest Profile

Previous Interests, Awards, Volunteer Activities: _____

Current Interests and Hobbies: _____

Musical Tastes (Play instrument? Sing? What music do they enjoy?): _____

Clubs/Organizations: _____

Religious Preference: _____

Social Interaction (Enjoy large social functions? Small groups? Being alone?): _____

Comments: _____



Sunny Day Club Photo Release

Name: _____ Date: _____

The above-mentioned named participant gives permission for the release of photographs to be made of him/her while engaged in Sunny Day Club activities.

These photos may be used for publicity/promotion of Sunny Day Club and also for identification purposes.

Participant Signature

Guardian Signature



Sunny Day Club Pick Up/Drop Off Release

Participant's Name: _____

I understand that the participant named above must be signed in prior to participating in the Sunny Day Club, and must be signed out prior to leaving. The following people have my permission to pick up or drop off the participant named above, and have been informed about this policy.

Name _____ Relationship to Participant _____

Name _____ Relationship to Participant _____

Name _____ Relationship to Participant _____

Name _____ Relationship to Participant _____

Name _____ Relationship to Participant _____

Participant Signature

Guardian Signature



Sunny Day Club®
Helpful Information
Tuesdays 11am-2pm Rm A292

Sunny Day Club® Contacts

Katie Anderson: 615-370-9467 cell: 615-289-6001

Julie Thomas: 615-370-9327 cell: 615-554-5977

Brentwood UMC: 615-373-3663

Please call Katie or Julie in advance if you are unable to attend.
If you are unable to come at the last minute, call 615-373-3663 and have the BUMC receptionist let us know you will not be bringing your loved one.

For Initial **Sunny Day Club®** Membership Interviews
and/or Pastoral Concerns, please contact
Dr. Jeff Wilson: 615-373-3663 Ext.1296

Brentwood Sunny Day Club® Share and Care Group

Meets the Second Tuesday of Each Month
11am-noon, Room A291

Group support open to all Sunny Day Club® family caregivers.

Alzheimer's Support Group

Meets the Second Tuesday of Each Month at 7pm, Room A389

West End UMC Sunny Day Club®

A separate respite organization
Meets Mondays

For information call 615-321-8500

Bellevue Presbyterian Church Sunny Day Club®

A separate respite organization
Meets Wednesdays

For information call 615-646-1666

Hillcrest United Methodist Church Sunny Day Club®

A separate respite organization
Meets Wednesdays
For information call 615-832-0157

Inclement Weather Policy

Brentwood UMC Sunny Day Club operates on the Williamson County School inclement weather policy. If the schools are closed, we are closed. If they open 2 hours late, we are open at our regular time. Feel free to call Katie or Julie with any questions concerning the weather.

In case of bad weather, you may park your car under the portico at the main entrance of the church leading to the Narthex. You may enter with your loved one through the handicap door access located to the left of that main door and walk your loved one down to the Sunny Day room. Your car may remain parked under the cover until you return from signing your loved one in. You may also park under the portico while picking up your loved one in the afternoon.

Brentwood UMC Sunny Day Club does have a Tornado policy in place. In case of a Tornado warning, your loved one will be in a designated safe place with the Sunny Day volunteers until we receive an all clear from the church staff.

Things to Know

1. Please bring a sack lunch
2. Please bring \$1 weekly for dues
3. Drinks are provided
4. Please label lunch boxes, coats and other personal belongings



The Sunny Day Club is designed to be a positive social experience for all participants. The following guidelines have been formulated in an effort to create a good experience for all members, caregivers, and volunteers.

Expectations for Paid Caregivers

1. Paid caregivers will sit with their client during all Sunny Day Activities.
2. Paid caregivers will participate in all Sunny Day Activities.*
*If physical limitations prohibit full participation in some activities, exceptions can be made with the approval of Sunny Day Leaders.
3. Caregivers will promote, with their words and actions, a positive social environment for the benefit of all involved with Sunny Day.
4. Caregivers will pay the \$1.00 per person dues and bring a sack lunch to eat with the group.

Participants' Rights

1. The right to be treated as an adult, with respect and dignity.
2. The right to participate in a program of services and activities that promotes positive attitudes on one's usefulness and capabilities.
3. The right to be free from physical, mental, sexual, and verbal abuse, neglect, and exploitation.
4. The right to be free from actual or threatened physical or chemical restraints.
5. The right to be encouraged and supported in maintaining one's independence to the extent that conditions and circumstances permit, and to be involved in a program of services designed to promote personal independence.
6. The right to privacy and confidentiality.