

Lifetime Connections Without Walls

A virtual community for older adults

REGISTRATION FORM Spring 2024: April 1 - June 30

Please complete and return by mail, email, or call us with your registration.

*If you're renewing, you may just fill out your name, current income, and any updates you may have.

MAIL: LCWW, c/o Family Eldercare, 1700 Rutherford Ln., Austin, TX 78754

EMAIL: lcww@familyeldercare.org

PHONE: (888) 500-6472

Name:			DOB:					
Address:								
City:	State:	Zip Code:	County:					
Phone number you want to use for	sessions:							
Email (required for video sessions):							
Marital Status: □Married □Widow	□Divorced	□Single □Separated	Military Veteran: ☐ Yes ☐ No					
Ethnicity/Race:			Gender:					
\square Caucasian \square Black \square Hispanic \square As	sian 🗆 Othe	r:	□ Female □ Male □ Decline					
These income questions help us with our grant reporting.								
Monthly Income Amount: \$								
Source of Income: (example: Social Security, SSI, pension)								
Do you live:								
\square Alone \square With spouse/partner \square With family \square Residential care facility (assisted living, nursing home, etc.)								
Do you have any of the following impairments?								
$\underline{\text{Mobility}}: \square \ \text{Cane} \ \square \ \text{Walker} \ \square \ \text{Wheelchair} \qquad \underline{\text{Hearing}}: \square \ \text{Low hearing} \ \square \ \text{Deaf} \qquad \underline{\text{Vision}}: \square \ \text{Low vision} \ \square \ \text{Blind}$								
Emergency Contact:								
Name: Relationship:								
Contact info (phone/email):								
Please tell us about your interests and hobbies:								
Do you have a computer or tablet? ☐ Yes ☐ No Do you use the internet? ☐ Yes ☐ No								
These questions help us understand our participants and evaluate our program's mission.								
How often do you feel that you lack companionship? \square Hardly ever \square Some of the time \square Often								
How often do you feel left out? \square Hardly ever \square Some of the time \square Often								
How often do you feel isolated from others? \Box Hardly ever \Box Some of the time \Box Often								
How did you hear about us?								
If you connect to our sessions by pl participants who connect by video		<u>-</u>						



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SESSION SELECTION Spring 2024: April 1 - June 30

Select the sessions that you want to join. All sessions are available by phone. **For sessions that also incorporate video (noted with the \square icon), select if you will be joining by video OR phone.

0	Across the Miles	0	Historical True Crime 💻
0	Alzheimer's Association		\square Phone \square Video
	Educational Series 💻	0	Laugh Out Loud
	\square Phone \square Video	0	Living Well with Vision Loss
0	Armchair Traveling 🖳	0	Medicare Minutes
	□ Phone □ Video	0	Movie Chat
0	Art Workshop 🖳	 Museum Tour: Carros y Cultura: 	
	\square Phone \square Video	O	Lowriding Legacies in Texas
0	BINGO (currently a waitlist)		□ Phone □ Video
0	Book Club	0	Museum Tour: Irving Penn 🗕
0	Brain Aerobics		\square Phone \square Video
0	Celebrating Juneteenth	0	Name That Tune
0	Coffee Talk	0	Nutrition Series
0	Get to Know LCWW	0	Older Americans Month 💻
0	Gratitude		□ Phone □ Video
0	Grief & Loss Support Group	0	Story Cafe
	Health & Wellness Series ■	0	Summer 2024 Sneak Peek
	□ Phone □ Video	0	Trivia & Brain Teasers
0	Hearing God's Voice	0	What is Pride Month? 💻
			□ Phone □ Video

For office use only:						
\square G \square RC \square D \square WL						
□ AASC □ Excel						