



SPECIAL NEEDS SCHOLARSHIP PROGRAM

LIABILITY WAIVER & CONSENT TO RELEASE INFORMATION

I/we understand that the purpose of the Senior Services Special Needs program is to provide services to seniors and their families that promote independence and the ability to remain in the home as long as possible. Such services may include: in-home care (homemaker, personal care); or emergency response services (Link-to-Life). Services will be provided by bonded agencies that have established an agreement with the City of Irvine. I/we have received information from the City of Irvine Senior Services program regarding these services and agree to receive such services as designated below:

TYPE OF SERVICE	FREQUENCY
AGENCY PROVIDING SERVICE	DATE OF SERVICE

I/we understand that information regarding our situation, the services we receive and the outcomes from our interaction with the City of Irvine Senior Services will be written on forms and shared with designated representatives of Senior Services and the contracting agencies. I/we do hereby consent for the City of Irvine Senior Services to release only the information required to coordinate with providers of the care and service we request.

I/we also understand that the scholarship authorization will be in effect for up to one year, as funds remain available. I also understand that I am encouraged to make a donation towards the cost of services received, however no senior is turned away based upon inability to pay. I also understand that I/we have the right to discontinue service.

I/we, have read and received a copy of the guidelines associated with the program. The undersigned, hereby agree to indemnify and hold harmless the City of Irvine Community Services Department and any of their officers, clients, agents, employees or volunteers from any liability of claim or action for damages in any way arising out of participation in this program by the person(s) listed below. Any claims of loss or damage related to this service must be submitted directly to the homecare agency.

SIGNATURE	NAME	DATE
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SIGNATURE	NAME	DATE
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WITNESS SIGNATURE	WITNESS NAME	DATE
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