



PO Box 1136
Ridgefield, CT 06877
www.sphereCT.org

2026 MEMBERSHIP APPLICATION

Ridgefield, CT Programs

Please Check: ☐ New ☐ Renewal

Name:

Date of Birth: ____/____/____

Gender: M F

Age:

Street Address:

City:

State:

ZIP Code:

Email:

Phone number:

Cell Phone number:

Shirt Size:

Parent / Guardian / Conservator Information

Name:

Legal Relationship:

Address:

City:

State:

ZIP Code:

Email:

Phone number:

Cell Phone number:

Emergency Contact

Name:

Phone number:

Email:

Relationship:

Member Information

Please circle the living arrangement the applicant is currently in:

Group Home Lives at Home Independent Supportive Apartment

Does the applicant have support staff: YES / NO

Name of Support Staff: _____ Phone # _____

Please list the support staff's responsibilities at SPHERE programs:

Medical Information

All information that applicants submit is kept strictly confidential.

- Please list applicant's known physical, cognitive and/or developmental diagnoses:
- Please describe the applicant's general behavior, interests, and social abilities:
- Additional comments and/or support strategies:

Participant Agreement and General Release

1. I will follow directions from the program leads and assistants.
2. I will have a good attitude and be respectful of others.
3. I will pay \$50 annual dues for SPHERE membership (payable to SPHERE).
4. Continuing in 2026, members must also commit to volunteering at least five (5) hours per year at SPHERE events. We have found that the same members offer a helping hand when needed and it would nice if all members gave back at times when we need some help (town events, jewelry workshops, art shows, etc.)
5. SPHERE, Inc. ("SPHERE"), has authorization, both during and anytime after the term of Membership, to use the likeness and voice of my ward, or myself ("Participant" or "Member"), alone or with others, by means of photograph, video, audio recording, or any other medium that exists now or in the future and is chosen by SPHERE for use in promotional materials or publicity, or for any other legal use within the scope of Sphere's purpose. This right to use includes the right to edit the likeness and voice. I understand Participant's likeness and voice may appear in internal publications, promotional audio/visual presentations, or external publicity, including, without limitation, use in SPHERE's website, newsletters, annual report, or movies. "Use" also includes the right to use Participant's name in connection with the likeness and voice.

It is agreed that Participant will have no right to (i) pre-approve SPHERE's use or editing of Participant's artwork, likeness or voice as described above, (ii) claim compensation for SPHERE's use of Participant's artwork, likeness or voice as described above, or (iii) make any claims based on SPHERE's use or discontinuance of use of Participant's artwork, likeness or voice as described above, including any claims for libel, defamation, or invasion of privacy. I agree that SPHERE will own all images and voice recordings taken or made by it or its representatives. It is understood that if Participant's artwork, image, or voice appears on SPHERE's website or is otherwise distributed by SPHERE, it may be viewed, heard and copied by third parties. Participant waives any claims against SPHERE and agrees not to hold SPHERE responsible for use of Participant's artwork, likeness, voice, or name by third parties.

6. It is agreed that all intellectual property and tangible property made during SPHERE activities is the property of SPHERE and will be retained and/or sold by SPHERE, subject to the discretion of the directors.
7. It is recognized that, due to the nature of this activity, an injury may occur. In the event of an injury to myself or a family member, Participant gives permission to the called physician to render appropriate treatment and agree to pay for such treatment. SPHERE, Inc. and its employees, members, officers and directors, and the Jesse Lee United Methodist Church are hereby released from any liability arising out of any event or injury occurring during this activity, whether caused by the negligence of any third party and/or negligence or neglect of any staff member or other participant. The Participant and his/her family, guardian, caregivers and/or personal representative expressly agree to assume all responsibility for the participant or the family members or others attending or that they invite to attend these activities, including injury that might be sustained while participating, which includes coming to, leaving from and participating in any activity of SPHERE, Inc. It is understood that this release applies to any present or future injuries or events or activities. I have read this statement and sign it voluntarily. I agree to provide a copy of this waiver to all family members or third parties who attend or participate in any activities or events involving SPHERE, Inc. that I invite or who come with me to view, participate in or attend any and all SPHERE, Inc. activities and events.
8. SPHERE Transportation Waiver and Release:

SPHERE, Inc. may provide transportation to select Special Events, including field trips. I understand that riding in that provided transportation could involve risk of physical injury, illness, death or property loss, and SPHERE cannot guarantee safety thereof. I understand that any medical expenses, property loss, or other personal expenditures that result during or from ridership on the SPHERE Van are to be borne by me (or by my parent/guardian).

I release and forever release, discharge and hold harmless SPHERE, Inc. and its successors, agents and assigns from any and all claims, actions, suits, procedures, cost expenses (including attorney's fees and expenses), damages and liabilities arising out of, connected with, or resulting from travelling on the SPHERE Van, including without limitation, those resulting from the conduct of myself and my companions. It is also understood SPHERE does not assume any responsibility for or obligation to provide financial assistance or other assistance, including but not limited to medical, health or disability insurance in the event of injury, illness, death or property damage.

9. If during the Participant's participation in SPHERE activities, the Participant should need emergency medical treatment, and I (the parent/conservator/guardian or Participant) am not able to give consent or decide on treatment, I authorize SPHERE to take whatever measures necessary to protect the Participant's health and well-being, including, if necessary, hospitalization.
10. I agree that the terms and provisions of this Release are severable, meaning if a court holds any portion of this Agreement to be unenforceable, the validity of the remaining portion shall not be affected. I agree that this document shall be interpreted under Connecticut law.

11. I have the right to contract in my own name or I am the parent, conservator and/or guardian with authority to sign this permission and release on behalf of the Participant. I have read this agreement and I fully understand it. This permission and release is binding on me and my heirs, legal representatives and assigns.

Signatures

I, the adult SPHERE Participant have read this paper and fully understand the provisions of the release that I am signing. I understand that by signing this paper, I am saying that I agree to the provisions of this release.

Signature: _____
SPHERE Member / Participant Signature

Date: ____/____/____

I, the Parent/Conservator/Guardian of this member, hereby give my permission for this member to participate in SPHERE, Inc. activities, rehearsals, recreation programs and all other programs. By signing, I am saying that I agree to the provisions of this release.

Signature: _____
Parent / Conservator / Guardian Signature

Date: ____/____/____