



# Intake & Expression of Interest Form

(For Youth, Families, and Organisations)

## Section 1: Contact Information

- Full Name: \_\_\_\_\_
  - Preferred Pronouns: \_\_\_\_\_
  - Age (if youth participant): \_\_\_\_\_
  - Parent/Guardian Name (if under 18): \_\_\_\_\_
  - Organisation/School (if applicable): \_\_\_\_\_
  - Email: \_\_\_\_\_
  - Phone: \_\_\_\_\_
- 

## Section 2: Program Interest

Which program(s) are you interested in? (tick all that apply)

- **Neurodiverse Social Club** (autistic / neurodivergent youth)
  - **Queer & Trans Youth Nights** (safe peer-led spaces)
  - **School Inclusion Intensives** (for schools)
  - **Parent & Carer Connect** (family workshops)
  - **Sebtus Poodles Wellbeing Classes** (NDIS / respite programs)
  - Other (please specify): \_\_\_\_\_
- 

## Section 3: Support & Accessibility Needs

- Do you have an NDIS plan?
    - Yes (self-managed / plan-managed / agency-managed)
    - No
  - Accessibility requirements (sensory, physical, communication):
- 
- 
-



## Section 4: Availability & Location

- Preferred location:
    - Bendigo
    - Echuca
    - Shepparton
    - Castlemaine
  - Preferred day/times: \_\_\_\_\_
- 

## Section 5: Referral & Consent

- How did you hear about us?
  - School referral
  - Headspace / YO Bendigo
  - Provider / NDIS partner
  - Word of mouth
  - Social media
- Consent to be contacted about program updates:  Yes  No

Signature \_\_\_\_\_ Date: \_\_\_\_\_