



Pick Me Ups Caregiver Information Form



Program Guidelines

Thank you for your interest! We at Pilot salute you for the amazing work you do! Please read the following guidelines and fill out the referral form below for consideration in the Pick Me Ups program!

1. Pick Me Up examples of items to request: the lawn cut, a haircut, or a meal.
2. A caregiver is defined as a person who is the primary caregiver for a person who needs care 24 hours a day.
3. Qualified caregivers will be given Pick Me Ups in the order the request was received and as funding becomes available.

Pick Me Ups Application

(To Be Completed by Prospective Pick Me Up Recipient)

Name _____ Date _____

Address _____ City _____ State _____ Zip _____

Phone _____ E-mail _____ Are you under 18? Y/N _____

Who do you care for? _____

Does the person you care for live with you? Y/N _____

Describe your caregiving duties and how often you do them?

What type of Pick Me Up would you like to receive?

Tell us a little about yourself. Any hobbies or particular things you like to do (gardening, types of arts and craft projects, books you like to read, etc.)?

Is there any particular type of information or resources regarding being a caregiver that you are in need of right now?

Pilot Club Use Only:

Club Name _____ Date Received _____

