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**BISM/DORS**

**Possibilities Fair Registration**

**For Seniors Losing Vision**

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| **Name:** |  |

**Lunch Preference:** [ ] Tuna Salad [ ] Chicken Salad [ ] Turkey [ ] Vegetarian**Payment Enclosed:** [ ] $20 Possibilities Fair payment, **OR**  [ ] $50 Possibilities Fair payment **PLUS** “Friends Sponsor” Donation of $30 (Your name will appear in the program under “Friends of the Possibilities Fair”) Make checks payable to: **BISM** **Mail to**: Blind Industries and Services of Maryland Attention: Andy McIver 3345 Washington Boulevard Baltimore, MD 21227**Age:**

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| --- | --- |
| [ ] 55-59[ ] 60-64[ ] 65-69[ ] 70-74[ ] 75-79[ ] 80-84[ ] 85-89[ ] 90-94 | [ ] 95-99[ ] 100 & over |

**Gender:** [ ]  Male [ ]  Female**Race/Ethnicity:**  [ ] Hispanic/Latino [ ] American Indian or Alaska Native [ ] Asian [ ] Black or African American [ ] Native Hawaiian or Other Pacific Islander [ ] White [ ] Two or more races (not Hispanic/Latino) [ ] Unknown (only if consumer refuses to identify) **Degree of Visual Impairment:**  [ ] Totally Blind (LP or NLP) [ ] Legally Blind (excluding totally blind) [ ] Severe Visual Impairment | **Major Cause of Visual Impairment:**  [ ] Macular Degeneration [ ] Diabetic Retinopathy [ ] Glaucoma [ ] Cataracts

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| --- | --- |
|  [ ] Other |       |

**Other Age-Related Impairments:**   [ ] Hearing Impairment [ ] Diabetes 1. [ ] Cardiovascular Disease and Stroke
2. [ ] Cancer

 [ ] Bone, Muscle, Skin, Joint, Movement Disorders [ ] Alzheimer’s Disease/Cognitive Impairment [ ] Depression/Mood Disorder [ ] Other Major Geriatric Concerns**Type of Living Arrangement:**  [ ] Lives Alone [ ] Live with Others (family, spouse, caretaker, etc.)**Type of Residence:**  [ ] Private Residence (house or apartment) [ ] Senior Living/Retirement Community [ ] Assisted Living Facility [ ] Nursing Home/Long Term Care Facility**Source of Referral:**  [ ] Eye Care Provider (ophthalmologist, optometrist) [ ] Physician/Medical Provider [ ] State VR Agency [ ] Government or Social Service Agency [ ] Senior Program [ ] Faith-Based Organization [ ] Independent Living Center [ ] Family Member or Friend [ ] Self-Referral [ ] Veterans Administration [ ] Other For questions call or email:Andy McIver, amciver@bism.org, 410-737-2648Stephen Polacek, spolacek@bism.org, 410-737-2653Shirley Riffle, sriffle@bism.org, 410-737-2645 |