



Dear Music for Memory recipient,

Soci t  Alzheimer Society
BRANT, HALDIMAND NORFOLK,
HAMILTON HALTON

We are so glad you are interested in participating in this program! Music for Memory is a volunteer based program aimed to create positive opportunities for both individuals and families affected by dementia. At the Alzheimer Society of Brant, Haldimand Norfolk and Hamilton Halton we recognize that every individual is unique and therefore has their own taste in music. Our Music for Memory volunteers are dedicated to creating personalized playlists for all recipients to ensure they have an enjoyable listening experience. It has been shown that listening to personalized music can help individuals with dementia respond to stimulation, improve memory and mood, increase quality of life, improve cognitive levels, and increase social interaction.

In order to participate in the Music for Memory program, recipients must be willing to sign a consent form prior to receiving any equipment. It is important that the form be read and signed to ensure the participant understands that they can borrow an MP3 player, a set of headphones, and a wall charger for four months at a time. **This equipment is expected to be returned to the Alzheimer Society in good working order or costs covered at the end of the 4 month program.** Additionally, it is required that all program participants provide feedback to a volunteer at one week and three month intervals.

Through the Music for Memory program, people living with dementia are able to reminisce on their past experiences. For the majority of people with dementia, the ability to remember their past is extremely beneficial towards their quality of life. It is our hope that the music we provide will help unite families by creating and celebrating memories, both old and new.

Without the generous support of the Rotary Club of Brantford Sunrise, the Simcoe Lions Club, 100 Women Who Care of Burlington, 100 Women Who Care of Norfolk, One Hundred Men Who Give A Damn of Brantford, we would not have been able to launch, support and sustain the Music for Memory program. Because of them, we are able to improve the lives of individuals and families affected by dementia.

If you have any questions about the Music for Memory program please call or leave a message at 1-800-565-4614 ext. 802

Alzheimer Society

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Music for Memory: Consent to Participate

I, _____, understand that participation in the Alzheimer Society of Brant, Haldimand Norfolk, Hamilton Halton Music for Memory program is voluntary.

OR

I, _____, as an authorized representative for _____ consent to his/her participation in the Alzheimer Society of Brant, Haldimand Norfolk, Hamilton Halton Music for Memory program and understand that participation is voluntary.

I agree to release the Alzheimer Society of Brant, Haldimand Norfolk, Hamilton Halton and their employees, representatives, and agents from any liability for injury, disability, or financial cost resulting from the participation in the program.

I acknowledge responsibility of the electronic device. I agree to use the equipment as directed by the Music for Memory volunteer, and understand that any equipment provided to me is provided for 4 months at a time.

Please read and check:

- I agree to return provided equipment in good working order once the 4 month lending period is over.
- I understand the participation requirements of the program and agree to follow-up by phone, as the Society deems necessary for research and participation needs related to the program
- I agree to speak to a Music for Memory volunteer for the scheduled follow-up calls; at 1 week and 3 month intervals
- I understand I may contact the Alzheimer Society of Brant, Haldimand Norfolk, Hamilton Halton in addition to the scheduled follow-ups as I deem necessary for additional support and programming the Society may offer
- I agree to the collection and storage of my personal information in the Alzheimer Society of Brant, Haldimand Norfolk, Hamilton Halton secure database. I also agree to the exchange of any information provided with partners and volunteers for use within the program.

Name (please print)

Signature:

Date:

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HAMILTON HALTON

Music for Memory: Application Form

Client Case #: _____

Office: Brant HN Burlington Hamilton

(For office use only)

Please complete all the information below

Form completed by:	Date (DD/MM/YY):
Have you or a family member previously received, or are currently receiving, services from the Alzheimer Society of Brant, Haldimand Norfolk, or Hamilton Halton? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Name of Alzheimer Society staff contact (if known):	
Which Alzheimer Society office site would you like to pick up your music kit once complete? <input type="checkbox"/> Simcoe <input type="checkbox"/> Hagersville <input type="checkbox"/> Burlington <input type="checkbox"/> Hamilton <input type="checkbox"/> Brantford	

Who will be using the Music Device?

First Name:	Last Name:		
Date of Birth:	Phone:		
Email:			
Address:		<input type="checkbox"/> Home <input type="checkbox"/> Retirement Home <input type="checkbox"/> Long Term Care <input type="checkbox"/> With Family/Friends <input type="checkbox"/> Other: _____	
City:	Province: ONTARIO	Postal Code:	Country: CANADA
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other: _____			
Are you comfortable using computer technology? <input type="checkbox"/> Yes <input type="checkbox"/> No		Are you comfortable using MP3 technology? <input type="checkbox"/> Yes <input type="checkbox"/> No	

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CARER:

First Name:		Last Name:	
Date of birth:	Home phone:	Cell phone:	
Email:			
Address: <input type="checkbox"/> same as music device user/above		<input type="checkbox"/> Home <input type="checkbox"/> Retirement Home <input type="checkbox"/> Long Term Care <input type="checkbox"/> With Family/Friends <input type="checkbox"/> Other: _____	
City:	Province: ONTARIO	Postal Code:	Country: CANADA
Relationship to person living with dementia:		Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other: _____	
Are you comfortable using computer technology? <input type="checkbox"/> Yes <input type="checkbox"/> No		Are you comfortable using MP3 technology? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Contact Point:

Who should the volunteer speak to when collecting feedback? <input type="checkbox"/> Music device user <input type="checkbox"/> Carer
Preferred method of contact (when providing feedback at 1 Week & 3 Months): <input type="checkbox"/> Home phone <input type="checkbox"/> Cell phone
Are you comfortable with a volunteer leaving a voicemail if you are not available to answer your phone? <input type="checkbox"/> Yes <input type="checkbox"/> No

FOR OFFICE USE ONLY:

Device Used:	Unit #:	Date Issued:
Music upload completed by:		Date of Music Upload:
Playlist titled:	Notes:	

Music for Memory-Music Preference Questionnaire

Music for Memory User Name	Date:
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1. How important a role does music play in your life?

- Very Important
- Moderately Important
- Slightly Important
- Not Important

2. Did/Do you play a musical instrument?

- Yes
- No

If yes, please specify (ex. piano, guitar, etc.):

3. Do you enjoy singing?

- Yes
- No

If yes, please specify (ex. around the house, church choir, etc.):

4. Do you have a favourite decade(s)? If so, which one(s)?

5. Do you have a favourite song? If so, what is it? Do you have a favourite artist/band? If so, who is it?

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6. The following is a list of different genres of music. Please indicate your top 3 favourite types:

- 1 being your favourite type of music
- 2 being your 2nd favourite type of music
- 3 being your 3rd favourite type of music.

- Country
- Classical
- Spiritual/Gospel
- Big Band/Swing
- Easy Listening
- Folk
- Blues
- Jazz
- Rock and Roll
- Easy Listening

- Cultural/Ethnic -Details: _____
- Other -Details: _____

7. Do you have CD's at home that you enjoy listening to? Would you be willing to donate them to this program partnership with Alzheimer Society Hamilton Halton in order for us to be able to upload the music onto a music device? If yes, please include them with your forms.

- Yes
- No

Artist Selection List

Please checkmark the artists that interest you, please refer to last page for your suggestions.

Alternative	Country Classic cont.	Easy Listening
<input type="checkbox"/> U2	<input type="checkbox"/> David Wilcox	<input type="checkbox"/> Andrews Sisters
<input type="checkbox"/> Three Days Grace	<input type="checkbox"/> Dolly Parton	<input type="checkbox"/> Andy Williams
Big Bands/Swing	<input type="checkbox"/> Eddie Arnold	<input type="checkbox"/> Barbra Streisand
<input type="checkbox"/> Artie Shaw	<input type="checkbox"/> Eric Church	<input type="checkbox"/> Bing Crosby
<input type="checkbox"/> Benny Goodman	<input type="checkbox"/> Floyd Cramer	<input type="checkbox"/> Doris Day
<input type="checkbox"/> Canadian Brass	<input type="checkbox"/> Gene Autry	<input type="checkbox"/> Edye Gorme
<input type="checkbox"/> Ella Fitzgerald	<input type="checkbox"/> George Jones	<input type="checkbox"/> Englebert Humperdinck
<input type="checkbox"/> Glenn Miller	<input type="checkbox"/> George Strait	<input type="checkbox"/> Ferrante & Teicher
<input type="checkbox"/> Jimmy Dorsey	<input type="checkbox"/> Glen Campbell	<input type="checkbox"/> Henry Mancini
Blues/Jazz	<input type="checkbox"/> Hank Williams Jr	<input type="checkbox"/> Holly Cole
<input type="checkbox"/> B.B. King	<input type="checkbox"/> Johnny Cash	<input type="checkbox"/> John McCormack
<input type="checkbox"/> Benny Goodman	<input type="checkbox"/> Kenny Rogers	<input type="checkbox"/> John McDermott
<input type="checkbox"/> Dinah Washington	<input type="checkbox"/> Lady Antebellum	<input type="checkbox"/> Johnny Mathis
<input type="checkbox"/> Jimmy Reed	<input type="checkbox"/> Little Big Town	<input type="checkbox"/> Johnny Reid
<input type="checkbox"/> Jon Hendricks	<input type="checkbox"/> Loretta Lynn	<input type="checkbox"/> Judy Garland
<input type="checkbox"/> Louis Armstrong	<input type="checkbox"/> Marty Robbins	<input type="checkbox"/> Julio Iglesias
<input type="checkbox"/> Louis Jordan	<input type="checkbox"/> Merle Haggard	<input type="checkbox"/> Leonard Cohen
<input type="checkbox"/> Sonny Boy Williamson I or II	<input type="checkbox"/> Patsy Cline	<input type="checkbox"/> Liberace
Classical	Country Current	<input type="checkbox"/> Mel Torme
<input type="checkbox"/> Bach	<input type="checkbox"/> Alan Jackson	<input type="checkbox"/> Mills Brothers
<input type="checkbox"/> Beethoven	<input type="checkbox"/> Blake Sheldon	<input type="checkbox"/> Nana Mouskouri
<input type="checkbox"/> Chopin	<input type="checkbox"/> Faith Hill	<input type="checkbox"/> Neil Diamond
<input type="checkbox"/> Mozart	<input type="checkbox"/> Florida Georgia Line	<input type="checkbox"/> Paul Anka
<input type="checkbox"/> Stravinsky	<input type="checkbox"/> Garth Brooks	<input type="checkbox"/> Peggy Lee
<input type="checkbox"/> Strauss	<input type="checkbox"/> Luke Bryan	<input type="checkbox"/> Perry Como
<input type="checkbox"/> Tchaikovsky	<input type="checkbox"/> Miranda Lambert	<input type="checkbox"/> Ray Charles
Country Classic	Crooners	<input type="checkbox"/> Roger Whittaker
<input type="checkbox"/> Blazing Fiddles	<input type="checkbox"/> Andy Williams	<input type="checkbox"/> Rosemary Clooney
<input type="checkbox"/> Buck Owens	<input type="checkbox"/> Bing Crosby	<input type="checkbox"/> Sammy Davis Jr.
<input type="checkbox"/> Chris Young	<input type="checkbox"/> Dean Martin	<input type="checkbox"/> Tony Bennett
<input type="checkbox"/> Dan & Shay	<input type="checkbox"/> Frank Sinatra	<input type="checkbox"/> Vera Lynn
<input type="checkbox"/> Darius Rucker	<input type="checkbox"/> Johnny Mathis	<input type="checkbox"/> Yanni

Disco	Musicals	Relaxation/Nature
<input type="checkbox"/> Barry White	<input type="checkbox"/> Fiddler on the Roof	<input type="checkbox"/> Bird Calls
<input type="checkbox"/> Donna Summer	<input type="checkbox"/> Grease	<input type="checkbox"/> Celtic Whispers
Eastern Canada/Acadian	<input type="checkbox"/> Jersey boys	Religious/Inspirational
<input type="checkbox"/> Anne Murray	<input type="checkbox"/> Sound of Music	<input type="checkbox"/> Andrew Crouch
<input type="checkbox"/> Barra MacNeils	<input type="checkbox"/> Mamma Mia	<input type="checkbox"/> Bill & Gloria Gaither
<input type="checkbox"/> Lennie Gallant	<input type="checkbox"/> West Side Story	<input type="checkbox"/> Mahalia Jackson
First Nations/Aboriginal	Opera	40's
<input type="checkbox"/> Blackfoot Traditional	<input type="checkbox"/> A Chorus Line	<input type="checkbox"/> Bing Crosby
<input type="checkbox"/> Cree Traditional	<input type="checkbox"/> Les Miserables	<input type="checkbox"/> Dinah Shore
<input type="checkbox"/> Iroquois Traditional	<input type="checkbox"/> Luciano Pavarotti	50's
<input type="checkbox"/> Mohawk Hymns	<input type="checkbox"/> Phantom of the Opera	<input type="checkbox"/> The McGuire Sisters
<input type="checkbox"/> Ojibway Traditional	<input type="checkbox"/> Three Tenors	<input type="checkbox"/> The Platters
Folk	Pop/Rock	60's
<input type="checkbox"/> Bob Dylan	<input type="checkbox"/> Billy Joel	<input type="checkbox"/> Beach Boys
<input type="checkbox"/> Bruce Cockburn	<input type="checkbox"/> Bobby Vinton	<input type="checkbox"/> The Drifters
<input type="checkbox"/> Gordon Lightfoot	<input type="checkbox"/> Brenda Lee	70's
<input type="checkbox"/> Leonard Cohen	<input type="checkbox"/> Buddy Holly	<input type="checkbox"/> Phil Collins
French/Quebecois	<input type="checkbox"/> Carly Simon	<input type="checkbox"/> Michael Jackson
<input type="checkbox"/> Céline Dion	<input type="checkbox"/> Carpenters	80's
<input type="checkbox"/> Chansons à Répondre	<input type="checkbox"/> Diana Ross/Supremes	<input type="checkbox"/> Dionne Warwick
<input type="checkbox"/> Enrico Macias	<input type="checkbox"/> Fats Domino	<input type="checkbox"/> Lionel Richie
<input type="checkbox"/> Gilles Vigneault	<input type="checkbox"/> Fleetwood Mac/Stevie Nicks	<input type="checkbox"/> Steve Miller Band
<input type="checkbox"/> Roch Voisine	<input type="checkbox"/> Guess Who	<input type="checkbox"/> Whitney Houston
Hip-Hop/R&B	<input type="checkbox"/> James Taylor	90's
<input type="checkbox"/> Beyoncé	<input type="checkbox"/> Kenny G	<input type="checkbox"/> Bryan Adams
<input type="checkbox"/> Curtis Mayfield	<input type="checkbox"/> Mamas and the Papas	<input type="checkbox"/> Toni Braxton
Jammin'	<input type="checkbox"/> Neil Young	00's
<input type="checkbox"/> Shaggy & Sanchez	<input type="checkbox"/> Prince	<input type="checkbox"/> Alicia Keys
<input type="checkbox"/> Technotronic	<input type="checkbox"/> Rod Stewart	<input type="checkbox"/> Enrique Iglesias
Jukebox Favourites	Rap	10's
<input type="checkbox"/> Conway Twitty	<input type="checkbox"/> MC Hammer	<input type="checkbox"/> Taylor Swift
<input type="checkbox"/> Otis Redding	Reggae/Calypso	20's
<input type="checkbox"/> Patti Page	<input type="checkbox"/> Bob Marly	<input type="checkbox"/> Adele

Personalized Music List

Please use the chart below to request artists that are not listed on the “Artist Selection List”. If you own a CD by your artist choice, the music from the CD can be downloaded onto your assigned music device by a Music for Memory volunteer **if you donate the CD** to the Alzheimer Society.

	<u>Artist</u>	<u>Song Title</u>
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		
13		
14		
15		
16		
17		
18		