

Sharon Respite House Weekend Registration Form

Select Fridays from 5 p.m through Sunday at 3 p.m.



Individual's Name: _____

Address: _____

Phone: (____) _____ - _____ Email Address: _____

Individual's Age: _____ Birthdate: _____

Individual's Primary/Secondary Disability: _____

Parent/Guardian: _____

Parent/Guardian Contact Info (if different from Individual's): _____

COST:
\$100 for NSN Families
MSW and Out-of-Area Families: Please contact for more information

Please indicate the **weekend(s)** your Participant is interested in attending our Sharon Respite House Weekend at 101 North Main Street, Sharon, MA 02067

Check here if you have **NOT** completed an intake form

July 14-16, 2023 _____

August 4-6, 2023 _____

September 22-24, 2023 _____

We will do our best to accommodate your loved one. However, depending on the number of participants, we cannot guarantee that we can offer you all your requested days or staffing requests.

Please contact FamilySupport@CharlesRiverCenter.org with any questions.