RECOMMENDATION 1: PROGRAM INFORMATION

Who 1. Organization Name and Background Information: Name of organization Provide the • Background information of organization following Mission and vision information Values regarding inclusion about your Disability or Inclusion policy organization and Funding sources or sponsors staff: 2. Contact Information: Clear and up to date contact information • Who to contact for additional program information 3. Staff Information: Name Programs taught Credentials Photo • Interesting information about staff Training experience Certificates Vulnerable sector check Contact information What 1. Description of Program Activities: Type of activity Provide the Level of inclusion following Level of competition information Eligibility about the • Level of challenge (e.g., competitive or non-competitive) physical activity Activity breakdown programs Classification information for competitive programs (if required) offered: 2. Participant Reviews: Program reviews from families and individuals with disabilities 3. Populations Served: Who is able to participate in the program? Chronological age Cognitive age Details regarding the specific disabilities this program serves (e.g.,

disabilities)

developmental or intellectual disabilities, physical disabilities, sensory

4. Supports Available: • Coach or Instructor: Participant ratios/assistance • Strategies for inclusion, adaption, or modifications Transitions 5. "Must Bring": Must bring items 6. Cost: Cost of program Payment types accepted Available subsidies Additional costs of equipment Government financial Additional costs of support (if applicable) support Refund policies (if applicable) Payment schedule option **7.** Contact Information: • Contact information for the staff member running the program Where 1. Description of Facilities: Full location address Provide the Accessibility features and description of facilities following • Support or specialized equipment available information about your 2. Transportation Information: program Options (e.g., bus stops, train stations, transit services) location and facilities: When 1. Program Schedule and • Specific dates and times Timing: Provide the Clear schedule of Session plan and breakdown following when programs will Sessional breaks information • Transition times between programs take place about when your Duration of the Facility hours programs are program (e.g., offered: number of sessions, weeks, duration of each session) 2. Information Monitoring: Include a date to indicate when the information was last updated • Provide a date to when information will be updated if information is missing