



# Families Helping Families

## Resource Manual Form

Bayou Land Families Helping Families is a non-profit resource center for individuals with developmental disabilities and their families. In order for us to serve families in our community, we need an up-to-date resource manual that includes all local agencies and the services that they offer. To be included in our manual, please fill out the form below and fax it to (985) 447-7988 or email to BayouLandfhf@blfhf.org. All participating agencies may have access to the completed manual upon request.

**I would like to have access to this manual**  yes  no

|  |   |   |   |
|--|---|---|---|
|  |   |   |   |
| <b>Agency Name</b>                                 |   |   |   |
| <b>Phone</b>                                       |   |   |   |
| <b>Fax</b>   |   |   |   |
| <b>Address</b>                                     |   |   |   |
| <b>City</b>  |   |   |   |
| <b>State</b>                                       |   |   |   |
| <b>Zip</b>   |   |   |   |
| <b>Website</b>                                     |   |   |   |
| <b>Email</b>                                       |   |   |   |
| <b>Contact Person</b>                              |   |   |   |
|  |   |   |   |
| <b>Agency Type (check all that apply)</b>          |   |   |   |
| <input type="checkbox"/> Advocacy                  | <input type="checkbox"/> Domestic Violence    | <input type="checkbox"/> Information and Referral | <input type="checkbox"/> School Services  |
| <input type="checkbox"/> Child Abuse Prevention    | <input type="checkbox"/> Food Services        | <input type="checkbox"/> Legal Services           | <input type="checkbox"/> Service Provider |
| <input type="checkbox"/> Child Protection Services | <input type="checkbox"/> Family Services      | <input type="checkbox"/> Medical                  | <input type="checkbox"/> Shelter          |
| <input type="checkbox"/> Church                    | <input type="checkbox"/> Financial Assistance | <input type="checkbox"/> Mental Health            | <input type="checkbox"/> Substance Abuse  |
| <input type="checkbox"/> Crisis                    | <input type="checkbox"/> Health Services      | <input type="checkbox"/> Prosecution Services     | <input type="checkbox"/> Transportation   |
| <input type="checkbox"/> Community/Social Services | <input type="checkbox"/> Infant Services      | <input type="checkbox"/> Transportation           | <input type="checkbox"/> Woman's Services |
| <input type="checkbox"/> Disability Services       | <input type="checkbox"/> Other _____          |   |   |
| <b>Parishes Served (check all that apply)</b>      |   |   |   |
| <input type="checkbox"/> Assumption                | <input type="checkbox"/> St. James            | <input type="checkbox"/> Terrebonne               |   |
| <input type="checkbox"/> Lafourche                 | <input type="checkbox"/> St. John the Baptist | <input type="checkbox"/> Other _____              |   |
| <input type="checkbox"/> St. Charles               | <input type="checkbox"/> St. Mary             |   |   |

**Services Offered (check all that apply)**

- |   |  |   |  |
|---|--|---|--|
| <input type="checkbox"/> Accepts Medicaid           | <input type="checkbox"/> Diagnosis                 | <input type="checkbox"/> Home Repair            | <input type="checkbox"/> Specialized Equipment   |
| <input type="checkbox"/> Adaptive Technology        | <input type="checkbox"/> Direct Support Worker     | <input type="checkbox"/> Housing Assistance     | <input type="checkbox"/> Speech/Language Therapy |
| <input type="checkbox"/> Advocacy                   | <input type="checkbox"/> Disability Assistance     | <input type="checkbox"/> Job Opportunities      | <input type="checkbox"/> Support Coordination    |
| <input type="checkbox"/> Aging/Senior Services      | <input type="checkbox"/> Education                 | <input type="checkbox"/> Medication Assistance  | <input type="checkbox"/> Supported Employment    |
| <input type="checkbox"/> Advocacy                   | <input type="checkbox"/> Emergency Services        | <input type="checkbox"/> Nutrition Services     | <input type="checkbox"/> Supported Living        |
| <input type="checkbox"/> Behavioral Health          | <input type="checkbox"/> Environmental Adaptations | <input type="checkbox"/> Occupational Therapy   | <input type="checkbox"/> Transitioning           |
| <input type="checkbox"/> Clothing                   | <input type="checkbox"/> Equipment and Supplies    | <input type="checkbox"/> Parent Training        | <input type="checkbox"/> Transportation          |
| <input type="checkbox"/> Counseling                 | <input type="checkbox"/> Family Counseling         | <input type="checkbox"/> Personal Care Services | <input type="checkbox"/> Utility Assistance      |
| <input type="checkbox"/> Community-Based Supports   | <input type="checkbox"/> Family Training           | <input type="checkbox"/> Physical Therapy       | <input type="checkbox"/> Vocational Habilitation |
| <input type="checkbox"/> Crisis Intervention        | <input type="checkbox"/> Financial Assistance      | <input type="checkbox"/> Professional Training  | <input type="checkbox"/> Other: (list)           |
| <input type="checkbox"/> Day Habilitation           | <input type="checkbox"/> Food Bank                 | <input type="checkbox"/> Recreation             | _____  |
| <input type="checkbox"/> Dental Services            | <input type="checkbox"/> Group Housing             | <input type="checkbox"/> Respite                | _____  |
| <input type="checkbox"/> Developmental Disabilities | <input type="checkbox"/> Home Health               | <input type="checkbox"/> Skilled Nursing        | _____  |

**Description of Agency (include programs offered if applicable)**

Thank you for your participation in completing this form. If you have any questions, please contact us at (985) 447-4461 or toll free 1 (800) 331-5570.