



2018

MVDSA Opportunity Award Application Packet

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Miami Valley Down Syndrome Association (MVDSA)
1133 S. Edwin C. Moses Blvd., Suite 335, Dayton, OH 45417

Phone: 937-222-0744 | Fax: 937-222-0396

Email: office@mvdsa.org

Website: www.mvdsa.org

2018 OPPORTUNITY AWARD OVERVIEW

About MVDSA Opportunity Awards

MVDSA Opportunity Awards are made possible by generous donations from individuals and organizations. The purpose of the Opportunity Award is two-fold:

- 1) to encourage community building among individuals with Down syndrome and their families (by encouraging active participation in events and programs), and
- 2) to provide funding for an Opportunity that directly enriches the life of the individual with Down syndrome, such as summer camp, therapies, iPads and other approved enriching goods or services.

Details for the 2018 Opportunity Awards

- The maximum Opportunity Award per individual with Down syndrome in 2018 is \$500.
- The amount of an individual's Opportunity Award is based on the individual's and/or family's participation in qualified MVDSA activities. For the 2018 Opportunity Award, individuals/families accumulated points from January 1, 2017 – December 31, 2017, following published guidelines in 2017. Families accruing 100 points, at least 10 of which must be volunteer points, will be given the maximum Award. Those accruing between 10 and 100 points will be given a corresponding percentage of the Award.
- Remember, the individual with Down syndrome (or family) **must have been member in good standing in 2017 to earn points and qualify for the 2018 award**. Lapsed dues may be paid to the MVDSA office.
- Any discrepancies regarding point totals for the 2018 award must be reconciled by July 31, 2018.

Applying for the 2018 Opportunity Award

Step-by-Step Instructions:

- (1) Complete the **Opportunity Award Application (Form #1)** and return it to the MVDSA office between April 1, 2018 – July 31, 2018. There will be no exceptions to the July 31, 2018 deadline.
- (2) The next step depends on your selection:
 - (a) If you opted to **Select an Option from the Pre-Approved List**, simply contact the Provider to begin services, and once complete, have the Provider submit a **Provider Invoice (Form #2) accompanied with a Billing Statement postmarked no later than December 1, 2018 (no exceptions)**. If the option selected includes purchases from a website or catalog – orders will be placed by the MVDSA Office. It is your responsibility to contact the office to place the order prior to December 1, 2018.
 - (b) If you opted to make an **Other Request**, you must await approval from the MVDSA. (Approval or denial will be given by phone/email. If your request is denied, you may continue to submit requests for approval until July 31, 2018). Upon approval of your request, simply have the Provider submit a **Provider Invoice (Form #2) accompanied with a Billing Statement postmarked no later than December 1, 2018 (no exceptions)**. If the option selected from this list includes purchases from a website or catalog – orders will be placed by the MVDSA Office. It is your responsibility to contact the office to place the order prior to December 1, 2018.
- (3) Regardless of which option you select, make certain to submit your **Opportunity Story (Form #3) by December 1, 2018**. *Payments will not be made without an Opportunity Story – no exceptions.*

Please Note:

- Awards will only be paid *after* goods/services are rendered. If your provider requires pre-payment, you must first check with the MVDSA Office. Personal reimbursements will not be made—no exceptions.
- The Opportunity Award must be paid via ONE check to ONE Provider.

Please contact the MVDSA Office at 937-222-0744 or office@mvdsa.org with any questions.

2018 OPPORTUNITY AWARD PRE-APPROVED PROVIDER LIST

PT, OT and/or Speech Therapy Providers

ABC Pediatric Therapy (PT, OT and/or Speech)
Cincinnati Children's Therapy (PT, OT and/or Speech)
Dayton Children's Therapy (PT, OT and/or Speech)
Joanna Kuzilla (Private Speech Therapist)
Kristen Russ (Private Speech Therapist)
Rehabilitative Center for Neuro. Dev. (Neuro Therapy)
Synergy Family Therapy (PT, OT and/or Speech)
Therapy Connections (PT, OT and/or Speech)
Triangle Therapy Services (PT, OT and/or Speech)
United Rehabilitative Services (PT, OT and/or Speech)

Sports and Recreation Providers

Anytime Fitness (Personal Training) **
Aqua-Tots Swim Schools
Bridge Riding for the Disabled (Hippotherapy)
Buddy Up Tennis (Tennis Lessons)
Dorie Phillips (Music Therapy)
Goldfish Swim School (Swim Lessons) **
Kids Are Tops (Gymnastics) **
Let's Do It Fitness (Personal Training) **
Local YMCAs and Recreation Centers (Various Lessons) **
Miami Valley Music Therapy (Music Therapy)
Miss Leslie's School of Dance (Dance Lessons)
Quest Dance Center (Dance Lessons)
Rehabilitative Center for Neuro. Dev. (Aquatic Therapy)
Smile Awhile Dance Studio (Dance Lessons)
Therapeutic Riding Institute (Horseback Riding)
Twigs Gym (Swim Lessons)
Volts Cheerleading (Cheerleading)

Camps

AIM (Adventures in Movement)
Camp Campbell Gard
Camp Discovery
Camp Emanuel
Camp PALS
Stepping Stones
Stride
United Rehabilitative Services

Educational and Therapy Materials

Abilitations.com (Various goods) ***
BeyondPlay.com (Various goods) ***
Down Syndrome Education Store (<http://store.dseusa.org>)
iPads *
Love & Learning (Reading Program)
Miami University (Phonics/Comprehension Class)
SchoolSpeciality.com (Various goods) ***
Signing Time (Signing Time DVDs, digital editions)
Special Reads for Special Needs (www.specialreads.com)
SuperDuperInc (Various goods) ***
TouchMath.com (Various goods) ***

PLEASE NOTE:

The * designation indicates special rules for iPads.

- 1) The scholarship dollar amount must be equal to or more than the combined cost of the iPad, warranty and case. No partial scholarships will be applied.
- 2) The individual receiving the iPad must be at least three years old by December 31, 2017.
- 3) Your family must have been a current, paid member of the MVDSA during January 1 – December 31, 2017.
- 4) Each individual who receives an iPad must wait five (5) years to become eligible for a new one.
- 5) Please remember, the iPad is **for the individual(s) with Down syndrome**, not for other family members or friends.

The ** designation indicates this option will only be granted with acknowledgement from the Provider that funds are to be used only for services for the named individual with Down syndrome.

The *** designation indicates this option will only be granted with supporting documentation from the individual with Down syndrome's doctors or therapists documenting the appropriateness of the item(s) requested.

2019 OPPORTUNITY AWARD POINT ACCUMULATION GUIDELINES

Version: 4/1/2018; Subject to Change

About MVDSA Opportunity Awards

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- 1) to encourage community building among individuals with Down syndrome and their families (by encouraging active participation in events and programs), and
- 2) to provide funding for an Opportunity that directly enriches the life of the individual with Down syndrome, such as summer camp, therapies, iPads and other approved enriching goods or services.

Details for the 2019 Opportunity Awards

- The maximum 2019 Opportunity Award per person with Down syndrome will be announced in 2018.
- The amount of an individual's Opportunity Award is based on the individual's and/or family's participation in qualified MVDSA activities. For the 2019 Opportunity Award, individuals/families will accumulate points from January 1, 2018–December 31, 2018, according to the guidelines listed below. Families accruing 100 points, at least 10 of which must be volunteer points, will be given the maximum Award. Those accruing 10–100 points will be given a corresponding percentage of the Award.
- Remember, the individual with Down syndrome (or family) **must be a member in good standing in 2018 in order to earn points 2019 award**. Lapsed dues may be paid to the MVDSA office.

Points May Be Earned as Follows:

(1) Participation Points

Ten participation points are awarded for every qualifying MVDSA-hosted event attended and are given per family (not per individual). Please be sure to sign attendance sheets! Here is a reminder of ways to earn points:

- 10 points awarded per family for submitting a picture of your loved one with Down syndrome and a short note about how the MVDSA helps them (to be published with MVDSA promotional materials, such as the newsletter, website and social media). Up to 20 points per year.
- 10 points awarded per family for each MVDSA meeting, DADS meeting, or Moms' Night Out attended.
- 10 points awarded per family for attending any event hosted by the MVDSA (i.e. Teen/Adult events, MVDSA's Next Chapter Book Club, playgroups, Buddy Walk®, etc.). *Attendance at Smile Awhile Dance and Buddy Up Tennis does qualify for point totals.*
- 10 points awarded per family for contributions only as requested and approved by the MVDSA Office including gift baskets for the Euchre Tournament, Buddy Walk, or other special events.
- 10 points awarded per 10 organizations solicited for donations to MVDSA events (according to
- MVDSA policy). You must fill out a solicitation form for each organization solicited, whether or not they actually donate (these forms and donations collected must be returned to the office within 2 weeks of solicitation to receive your points). Contact the MVDSA office first if you are looking to earn points in this way.

(2) Volunteer Points

- 70 volunteer points will be given per family for individuals who actively Chair or Co-chair an ongoing authorized MVDSA committee/event. Contact the MVDSA office with questions about this option.
- 10 volunteer points will be given per family for each time a family member volunteers for a one-time authorized volunteer opportunity. Check with the MVDSA office for volunteer opportunities!

Please contact the MVDSA Office at 937-222-0744 or office@mvdsa.org with any questions.



2018 OPPORTUNITY AWARD APPLICATION

Applications will be accepted from March 18, 2018—July 31, 2018 (no exceptions).

The 2018 Opportunity Award is based on points earned from January 1 –December 31, 2017.

To be completed by Parents/Guardians:

Name of Person with Down syndrome _____
(Please fill out one form per person with Down syndrome)

Date of Birth of Person with Down syndrome (MM/DD/YYYY) _____

Name(s) of Parent/Caretaker _____

OPPORTUNITY AWARD CHOICE: *(please choose one of the following, REQUIRED):*

Selected from the Pre-Approved List. List chosen Provider:

Other Request. Please list the Provider’s contact information, AND describe the requested service or product below. (You will be notified if/when request is approved).

Provider Name: _____

Provider Website or Address: _____

Provider Phone / Email: _____

Description of Request: _____

Please return this Application by email to office@mvdasa.org, by fax to 937-222-0396, or by mail to the following address, no later than July 31, 2018:

MVDSA (Attn: Opportunity Awards)
1133 S. Edwin C. Moses Blvd., Suite 335
Dayton, OH 45417



2018 OPPORTUNITY AWARD PROVIDER INVOICE

Provider Invoices will be accepted until December 1, 2018 (no exceptions).

To be completed by the Service Provider:

Service provided for: _____
(Name of Person with Down syndrome receiving services)

Description of service provided: _____

Total amount due: _____

A detailed billing statement must be submitted along with this Provider Invoice, including dates of service and all charges.

Make Payment Payable to: _____

Address: _____

Phone: _____

By signing this form, I, the Provider, acknowledge that all information regarding my services (including dates and charges) is accurate. I understand that any falsification of information will be prosecuted as fraud.

Signature of Provider: _____

Date: _____

Service Provider please submit invoice AND billing statement to the following address no later than December 1, 2018:

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Phone: 937-222-0744 | Fax: 937-222-0396
Email: office@mvdsa.org



2018 OPPORTUNITY AWARD STORY

Stories will be accepted until December 1, 2018 (no exceptions).

To be completed by the Person with Down syndrome, or his/her Parent/Guardian:

Name of Person with Down syndrome: _____

Description of service provided: _____

Required: Please write a few sentences explaining the importance of this Opportunity to the individual with Down syndrome. (This story can be completed either before or after services are performed, but the story is required before MVDSA will pay a Provider Invoice).

Optional, but greatly appreciated: Please send a picture of the person with Down syndrome.

Please check one:

I grant permission for this story/picture to be published with MVDSA promotional materials, including the MVDSA newsletter, MVDSA website, and MVDSA social media pages. Only first names will be used.

I do not grant permission for this story/picture to be published with MVDSA promotional materials.

Please return this Story and (optional) picture by email to office@mvdsa.org, by fax to 937-222-0396, or by mail to the following address, no later than December 1, 2018:

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1133 S. Edwin C. Moses Blvd., Suite 335
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