

Project SING application

Tell us about you:

Name	
Age or birth date	
Address	
How should we contact you? (phone, email, text, other)	

Tell us about your stroke:

When did it happen? Have you suffered more than one?	
How as this affected you in terms of	
- Your mobility?	
- Your ability to communicate?	
- Emotionally?	
- In any other way?	

Tell us about your interest in music therapy:

Were you referred to us, and if so by whom?	
What is your favourite type of music?	
Do you play an instrument?	

... and just in case there is a problem:

Will you be accompanied by a friend or relation at the sessions? If so, who?	
Who should we contact in the case of an emergency?	

... and finally:

Is there anything else you think we should know?	
--	--