

SASH for All is a FREE program that is currently available to families and individuals under age 65 who live at Moore Court or Ledgewood Heights.

Your Name:* _____

Your Phone Number:* _____

Your Email Address: _____

Name of Referring Organization (if applicable): _____

Name of Person You Are Referring or Enrolling * _____
(This is the “enrollee.” Enter “Same” if you are enrolling yourself.)

Enrollee’s Date of Birth:* _____

Does Enrollee Have Medicare?* ___ Yes ___ No Does Enrollee Have Medicaid?* ___ Yes ___ No

Enrollee’s Address: Street/911 Address _____

City/Town _____ State _____ Zip Code _____

Enrollee’s Phone Number:* _____
(Enter “Same” if you are enrolling yourself.)

Enrollee’s Primary Care Physician: _____

Enrollee’s Primary Care Location: _____

Other Services Currently in Place for Enrollee: SNAP Mental Health Support
 Dept. of Children & Families Other:

Please List Contact Information for Agency Support Providers: _____

Your Relationship to the Enrollee: _____

Enter Date Enrollee Consented to SASH Referral (if applicable): _____

Should We Contact the Enrollee Directly? * Yes No

Please return this form or direct questions to either:

Joyce St. Jean, Windham & Windsor Housing Trust
Phone: 802-246-2125 | Email: jst.jean@homemattershere.org

Lorelei Morrisette, Brattleboro Housing Authority
Phone: 802-246-1545 | Email: lmorrisette@brattleborohousing.org