



delaware  
foundation  
reaching citizens  
with intellectual disABILITIES

## DFRC

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Dear Parents,

The **68<sup>th</sup> DFRC Blue-Gold All★Star Football Game** is scheduled for **Friday evening, June 21, 2024**, at the University of Delaware Football Stadium! We are very excited to work with your family and each participating high school to help make this program more successful than ever—for both our high school participants and Hand-in-Hand Buddies.

To enroll your child in the 2024 DFRC Blue-Gold All★Star Football Game's Hand-in-Hand Program, please complete the enclosed sign-up form and Buddy behavior information sheet and return it to the DFRC Blue-Gold office by **February 8, 2024**. Forms may be emailed to [fwalsh@dfrc.org](mailto:fwalsh@dfrc.org), faxed to (302) 454-2755, or mailed to DFRC at 640 Plaza Drive, Newark, Delaware 19702.

The **Hand-in-Hand Program** matches DFRC Blue-Gold Buddies— children and young adults with intellectual disABILITIES— with high school participants in the DFRC Blue-Gold Program— football players, cheerleaders, band members, and student ambassadors. The DFRC Blue-Gold Committee has events and activities planned for the spring for Buddies and their participants to enjoy together. Buddy families and participants are also encouraged to keep in touch on their own to get to know one another outside of our planned events. You and your family are invited to participate in the activities with your child and the participant(s) with whom they are matched. Communication is the best way to make this experience work for everyone!

Please ALWAYS feel free to call our DFRC Operations Coordinator, Fiona Walsh, at **(302) 454-2730** or email her at [fwalsh@dfrc.org](mailto:fwalsh@dfrc.org) if you have questions. We look forward to a great year of the DFRC Blue-Gold Hand-in-Hand Program!

Sincerely,

Jada D. Little  
Executive Director

Barbara Spence  
Hand-in-Hand Chairperson



# DFRC Blue-Gold Hand-in-Hand Program 2024 Buddy Permission Form

By signing below, you give your permission for your child to participate in the 2024 DFRC Hand-in-Hand Program. Forms may be mailed to DFRC, 640 Plaza Drive, Newark, DE 19702, emailed to fwalsh@dfrc.org, or faxed to (302) 454-2755. **Please return this form to the DFRC office no later than February 8, 2024.**

Child's Name: \_\_\_\_\_ Male Female

School: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Age: \_\_\_\_\_

Home Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Is this your child's first year participating in the DFRC Hand-in-Hand Program? Yes No

**For the convenience of our buddies, participants, and families, DFRC sends notifications through email, text messaging, and phone calls. Please list the best email and cell phone number for you. If you do not have access to either of these services, please note below, and we will find an alternative communication method.**

Parent/Guardian Name: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

My Child enjoys: \_\_\_\_\_

**Participant Request** (if any): I would like my child to be matched with \_\_\_\_\_

Child's Disability and/or Syndrome. Please indicate any special needs. \_\_\_\_\_

Child's Allergies/Dietary Restrictions (food, medicine, etc.): \_\_\_\_\_

Child's T-Shirt Size (Please check one size— your child will be given the shirt size you order.):

**(Child Sizes)**  YS (6-8)  YM (10-12)  YL (14-16) **(Adult Sizes)**  S  M  L  XL  2X  3X

**Please include a recent photograph of your child. Pictures will be used for yearbook and media purposes.**

I hereby grant DFRC, Inc. and its representatives, employees, agents, and assigns the irrevocable and unrestricted right to use, reproduce and publish photographs, video, and audio recordings of me/my child. I hereby release DFRC, Inc. and its trustees, officers, employees, agents, legal representatives, and assigns from any and all claims, actions and liability relating to its use of said images.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

**Please complete the back of this form— Thank you!**



# DFRC BLUE-GOLD HAND-IN-HAND BUDDY BEHAVIOR INFORMATION

DFRC celebrates the ABILITIES of all people! We devote our efforts to provide opportunities for high school participants and Buddies to get to know and learn more about each other through the **DFRC Blue-Gold Hand-in-Hand Program**.

**Please list any specific information about your child's behavior and/or individual needs during interactions with new people, crowds, etc. in the space below. We will share this information with the high school participants matched with your child.** We hope that this will help create the most meaningful and comfortable interactions possible for everyone involved. If your child has a sensory or comfort item/toy that will help alleviate any stress they might experience, please be sure to take it with you to events and activities.

We understand the sensitive nature of the interactions between our DFRC Blue-Gold Buddies and their high school participants. We also recognize that some situations and behaviors may require special attention. In an effort to make the Hand-in-Hand experience the very best it can be for everyone involved, **we invite and strongly encourage parents and guardians of our buddies to attend DFRC events and activities. We also request that you be present when high school participants are interacting with your child.**

**Parents/guardians:** please read, complete, and sign this form. Forms may be mailed to the DFRC office at 640 Plaza Drive, Newark, 19702, emailed to [fwalsh@dfrc.org](mailto:fwalsh@dfrc.org), or faxed to (302)454-2755.

Behavioral Information/Other Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**By signing below, I indicate that I have read the above and have provided all relevant information about my child's behavioral needs and will follow the guidelines suggested during the 2024 DFRC Blue-Gold All★Star Football Program.**

Hand-in-Hand Buddy Name: \_\_\_\_\_

Parent/Guardian Printed Name \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_