

## Service Agreement

I \_\_\_\_\_, holder of ID N° \_\_\_\_\_ and residing at \_\_\_\_\_  
\_\_\_\_\_, hereby agree with the terms and conditions explained below as long as  
I am living and being supported by Aġenzija SAPPOR in any location/s that SAPPOR deems suitable for me.

I agree to participate in all the meetings that relate to the service that I am receiving as well as my involvement in the programme. This includes following the guidelines falling within Aġenzija SAPPOR's policies and procedures. The Agency binds itself to inform me of such meetings.

I agree and accept that while I am living under supervision of Aġenzija SAPPOR, the following conditions apply:

- I agree that immediately after I move into any of SAPPOR's residence/s my Disability Pension be transferred to Aġenzija SAPPOR on a 4-weekly basis, as well as other Statutory Bonuses, Allowances and Benefits received by myself, of which 60% of the total income will go towards the cost of living expenses and 40% will be kept for my own personal use.
- I consent that all the written information/reports of medical, psychiatric, psychological, and treatment plans be shared with Agency staff, internal and external consultants who are and will be involved with my physical/medical/psychological well being.
- I consent that if I require immediate and urgent medical, physical, psychiatric, psychological and/or other treatments based on the Agency consulting physician's judgement, I will participate in such appointments.
- I consent to be transported in the Agency vehicles, Agency staff personal vehicle and any Agency hired cars/buses. In any event that there is an unexpected accident that may injure me, I will not hold the Agency, staff members and Board of Directors responsible and will not press charges against the Agency or its Employees, unless there is negligent or careless driving.
- I consent to be photographed and video taped if it will not be used for commercial and/or publicity purposes.
- I consent to participate in research projects only if the goal is to better the quality of life for disabled individuals, provided that I give my approval for the said projects and that they are not detrimental to my physical and/or mental health.
- I consent that when I require to be held for my safety as well as that of others, staff members are allowed as last resort to physically control me during uncontrollable emotions.
- I understand and recognise that there are times when Aġenzija SAPPOR may need to close the residence/s for holidays, repairs and training. I agree to either plan to find alternative accommodation or consent to use other facilities or other respite providers of my own choice for that period of time.

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**Signature of Client**

**Signature of Witness**

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**Signature of SAPPOR Chief Operations Officer**

**Date**