

Check out our programs!

Baby Gear Lending Program, Training Opportunities, Fun Family Events, Scholarships, at least 10 Monthly Distribution Days, Support Group...and more.

! Members are informed of events, opportunities & meetings via the Shutterfly Group Share site...make sure you respond to the email you will receive to join the group site to stay informed. !

The Auxiliary operates a distribution center filled with community donations for members to select from on the following specific days 10 months each year (not in Sept. or Dec.) **Focus Group Members:**

1st Saturday of the month by appointment only. Email fostercareaux@yahoo.com or Call 714 778-3383 with your preferred ½ hour between 9am and 12:30pm. (Better yet- make your appointment on the Shutterfly site!) The Monday after the 1st Saturday will also be Focus Member Distribution Days between the hours of 11am and 12:30pm. No appointment needed.

Supporting Members

1st Saturday of the month or following Monday from 1-3. No appointment needed

Membership is \$75 per calendar year- one membership per household, valid January through December. Volunteering is appreciated from Focus members and required of Supporting members.

To join, please fill out the application below. Make your check payable to "FCAOC", & mail to Membership chair: FCAOC-Martin Harvey, 333 S. Brookhurst, Anaheim, CA 92804 For more information call 714 778-3383 or email FosterCareAux@yahoo.com

Please see survey on back of form - All who completely fill out get an extra distribution day! Foster Care Auxiliary Membership Application 2014 Please print neatly so that we will be able to transfer the information. Name: _____ Address: ____ City, state, zip code: _____ Email: cell: Home Phone: Check all that apply: Focus Members: How many minors (ALL, foster, adopted, birth) are in your household at this time? ☐ **F-1** County of orange licensed foster parents □ F-2 Kinship, NREFM, relative care givers of minors from the OC foster care system ☐ **F-3** FFA (other agency foster parents, not county of orange) Agency □ F-4 Providers of permanent home for minors from OC foster system(Guardianship, Adoptive) □ **F-5** Agency workers collecting distribution for foster children. **Supporting Members:** □ S-1 Supporting agency workers – we want to help – let us know your suggestions!

meetings/trainings, help at our events, or in our thrift store. All volunteer services must be arranged by contacting Kathy at fostercareaux@yahoo.com or 714-778-3383) □ **S-3** Donor – Thanks for your support!

□ S-2 Volunteers (A commitment of at least 24 hours during the year is required –minimum 2 hours per month are required prior to receiving services. Hours can be met by attending our

Staff Use Only:	Payment Method	Attach Receipt and Copy of Check

2014 FCAOC Focus Member Survey *All who completely fill out get an extra distribution day!*

Survey Respondent Name:

Contact Information: Email Phone City Zip Code

Are you a new FCAOC MEMBER? Or How Long have you been a member?

How long have you been a foster parent/ relative caregiver?

Are you licensed with OC, other agency or relative caregiver, other (please circle one, if other-please explain)

How many adults are in your home now?

How many of these were ever in the foster care system?

How many total minors are in your home now?

- A. Birth? B. Adopted? And if so, did you intend to adopt when child was placed with you?
- C. Foster? D. Other? (please explain)

How long have each been in your home?

- A. Birth? B. Adopted?
- C. Foster? D. Other? (please explain)

How many total foster children have you had placed with you?

Have any children aged out of system in your home? (18yrs.)

- A. Are they still living with you or did they, past the date they aged out?
- B. Are you supporting them? (Room/Board/Education)
- C. Did any leave with no resources or place to go?

How many children have left your home?

- A. Of these- how many returned to birth family or NREFM?
- B. —how many have moved to another foster home? Or group home?
- C. -how many moved to adoptive home?
 - 1. Of A, B and C- do you know of any failed placements?

How did you hear about FCAOC?

What needs does your family have?

What needs have been met from FCAOC?

What services have you received from FCAOC?

Ex: birthday corner, computers for foster students, scholarships, training hours, distribution, events, ...

Has there been a more positive outcome for your family as a result of the FCAOC (services, events, products)?

Do you have any example stories of how FCAOC helped your family? Included as extra sheet? Do you mind if we use your name if we share your story?