

# Dementia Alliance of North Carolina

## Music and Memory at Home Kit Application

**Program Listener** (name of person living with dementia):

**Caregiver Applicant Name:**



**Does the caregiver live in the same household as the program listener?** Yes or No

**Please Note:** Applicants must still be living at home to qualify for a free music kit.

**What is the relationship between the caregiver and program listener:**

spouse/partner      parent      in-law      sibling      friend      other \_\_\_\_\_

**Caregiver applicant phone:**

**Caregiver applicant email address:**

**Mailing Address for Kit:**

**Town/City:**

**Zip:**

**County:**

**Program listener's date of birth:** \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

**Please list any known places of residence from childhood through early adulthood:**

*Example: Childhood - Greensboro, NC*

**Race & Ethnicity (check all that apply)**

Black / African-American      Native American      White      Asian

Pacific Islander      Hispanic or Latino      Other \_\_\_\_\_

**Native Language(s) if other than English:** \_\_\_\_\_

**Dementia Diagnosis (check all that apply)**

Alzheimer's      Dementia      Lewy Body      Vascular      Frontotemporal

Other \_\_\_\_\_ I'm unsure \_\_\_\_\_

**Estimated Year of Diagnosis (Month, Year)** \_\_\_\_\_

**Other Medical Conditions (list)** \_\_\_\_\_

**Please answer the following questions and check N/A for any that do not apply:**

Did the program listener enjoy singing, perform in singing groups or at religious services? (Please specify denomination) \_\_\_\_\_ N/A

Did the program listener play a musical instrument either solo or as part of a band? What kind of music did they perform (orchestral, marching band, jazz, rock 'n roll etc)? \_\_\_\_\_ N/A

Did the program listener enjoy dancing? Did they ever perform in public or frequent social dances? \_\_\_\_\_ N/A

Does the program listener have any military history (Branch, Dates of Service and Location)? \_\_\_\_\_ N/A

**What to expect next:** After receiving this application, our team will create a draft playlist of 80-100 songs for inclusion in your music kit. Our playlists are focused on the artists/favorite tunes you will list on pages 3-4 as well as others our “music detectives” imagine your loved one may have enjoyed around the ages 10 to 30. This is a time of life known as the “reminiscence bump” where neural activity is strongest and musical favorites are more deeply felt by people living with dementia. Once we have a detective playlist created, we will reach out to you to schedule a listening session where we can fine-tune the playlist with your listener. Your finalized playlist is then loaded onto a dementia friendly mp3 player and we ship it to directly to you along with everything you need to make music a daily party of your care routines at home and on the go.

*We are grateful to the many donors and sponsors who make this program free of charge for residents of North Carolina.*



**Caregiver Consent**

I, as the caregiver, grant permission to Dementia Alliance of NC the use of photographs, videos and any feedback I share with program staff, for presentation under any legal condition, including but not limited to: publicity, copyright, illustration, advertising, web content and research.

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Printed Name (First and Last)

**Return by Email:**  
mymusic@DementiaNC.org

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Signature

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Date

**Return by Mail:**

Dementia Alliance of North Carolina  
9131 Anson Way, Suite 206 Raleigh,  
NC 27615



## My FAVORITE ARTISTS: List 5 or 6 favorite musical artists

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## My TOP 10 FAVORITE SONGS:

Please list specific song names with artists, if known. **Example:** *Houndog by Elvis Presely*

**TIP:** consider songs that bring back memorable moments, and **sing-along** favorites that brighten the mood or soothe the soul. Favorite hymns or songs from **faith** traditions and lively toe-tappers that get you **dancing** are all good bets.

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

5. \_\_\_\_\_

6. \_\_\_\_\_

7. \_\_\_\_\_

8. \_\_\_\_\_

9. \_\_\_\_\_

10. \_\_\_\_\_

## My FAVORITE GENRES:

- Country
- Rock
- Pop
- R&B
- Soul
- Blues
- Vocal Jazz
- Jazz
- Big Band
- Classical
- Opera
- Musicals
- Latin
- Bluegrass
- Folk
- Gospel
- Hymns
- Other(s) \_\_\_\_\_



**DEMENIA  
ALLIANCE**  
of North Carolina  
A STATE OF CARING