**Slipstream Dream, as part of the Region 1 DD Training Co-Op, offers: **

**DOWN SYNDROME & AGING**

**Instructor:** **Lori Thompson**

**Date: Tuesday, May 14, 2019**

**Time: 9:00 am-12:00pm**

**CLASS LOCATION**: **Goodwill Airport Outlet 5950 NE 122nd Ave. Portland, OR 97230**

On the corner of 122nd and Airport Way.Parking is available in the back portion of the lot (away from the front doors), in the SW corner. Come through main entrance and walk straight ahead to the grey door in the very back of the store.

**Cost: $25**/per person (Co-Op member rate) \* \*Member agency affiliates/staff, DD foster providers & family members of people case managed by Multnomah, Clackamas, Washington, Clatsop or Columbia County DD may pay member rates. Rate DOUBLES if not Co-Op Member/agency affiliation. **Snacks and coffee provided.**

**COURSE DESCRIPTION**:

This class will cover the major issues associated with the aging process for individuals with Down syndrome. Participants will learn about common medical, psychiatric, adaptive and cognitive issues often overlooked or incorrectly diagnosed. Different causes of functional decline will assist caregivers in supplying information to medical professionals and behavior consultant to assist in accurate diagnostic processes. Learn the hallmarks of dementia and how they are frequently confused with other medical or behavioral conditions. Learn how people providing direct support can make the most invaluable observations on a day to day basis **3 hours - AFH training credit**

**To register:** Use form below. Send check or money order only. No refunds for no-shows or cancellations less than 10 working days ahead of class. Mail registration and Payment to:

**Slipstream Dream Attn: Angie Townsend**

**11806 SE Solomon Ct. Happy Valley OR 97086**

**Questions?** Contact: Angie Townsend at 503-568-9765 or at angtown@sfh.build

*![MC900129382[1]]()Co-Op classes are self-funded & rely on advance registration or may be cancelled if unable to reach minimum enrollment. If cancelled, all registered will be notified. For more Co-Op classes & member info:*[*www.SDRI-pdx.org/co-op*](http://www.DisabilityCompass.org) *.*

**REGISTRATION & PAYMENT FORM: *Down syndrome & Aging 5-14-19***

**Name(s) Phone Number E-mail-please print clearly**

**Agency/Provider Foster Home?** 🞏**Y/**🞏**N Mail address City State/ZIP**

**Training Co-op member?** 🞏**Y/**🞏**N (Fee DOUBLES for non-members\*) Enclosed $ \_\_\_\_\_\_\_\_\_**

**Please send this registration form and check payable to Slipstream Dream, Attn: Angie Townsend**

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