

- ☐ Austin (Texas)
- ☐ Detroit (Michigan)
- ☐ Other (specify _____)

Services Request



- ☐ Acoustic Guitar
- ☐ Electric Guitar
- ☐ Guitar Amp
- ☐ Keyboard
- ☐ Drums
- ☐ Other _____

Individual or Organization's Name	
Individual's Age	
Address or Location	
Contact Phone & Email	

How did you hear about Pick With Austin (OR WHO REFERRED YOU) ?

Is there a professional mental health and/or depression diagnosis ?

How would you (or your organization) benefit from our services ?

Instructions:

- ❖ This form may be used by an individual or by an organization in order to request that we provide services.
- ❖ Complete the form and submit it electronically to jeffc@pickwithaustin.com (or mail to: Pick With Austin, P.O. Box 5191, Round Rock, TX 78683). Use an additional page if more space is needed.
- ❖ Please be aware that we do not always have guitars, amps, instruments, or special services available. When we do not, we will keep your request on file ("waiting list"). We may prioritize some requests based upon need and use.
- ❖ All requests are subject to a qualification review by the Pick With Austin Board of Director's Advisory Committee.
- ❖ All requests are maintained as confidential. We follow HIPAA guidelines. Organizations may make requests on behalf of individuals while keeping the individual's name and personal information undisclosed to Pick With Austin.
- ❖ Individuals making requests DO NOT have to be experiencing a mental health related issue, but those who are may receive a higher priority.