



**HEAR for Kids®** is a program providing loaner hearing aids to children. The program was made possible by grants from St. Luke's Health Initiatives, and private donations  
Contact: [lylisolsen@msn.com](mailto:lylisolsen@msn.com) or 602-690-3975

Child's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Home Address: \_\_\_\_\_

Birth Hospital: \_\_\_\_\_ Age Identified: \_\_\_\_\_

Person responsible for the child: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Relationship to Child: Mother Father Guardian

Alternate Contact Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**Audiologist Please Complete this Section**

Please use the online system at [www.EARFoundationaz.com](http://www.EARFoundationaz.com) to reserve a hearing aid. This form should be used, at the time of fitting, for all **HEAR for Kids®** loaner aids.

Audiologist: \_\_\_\_\_ email: \_\_\_\_\_

Facility: \_\_\_\_\_ Phone number: \_\_\_\_\_

Hearing Aid Make: \_\_\_\_\_ Model: \_\_\_\_\_ Serial # \_\_\_\_\_

Hearing Aid Make: \_\_\_\_\_ Model: \_\_\_\_\_ Serial # \_\_\_\_\_

**Fax completed form to: 602-296-0425**

**Parent/Guardian Please Complete this Section**

**By signing this form, you agree to:**

- Take care of the hearing aids so that they are not lost or damaged.
- Return them no later than \_\_\_\_\_ (six months from date of fitting).
- Keep all follow up appointments as scheduled
- Contact the audiologist if you have any questions or concerns.
- Release your child's medical information, related to the hearing loss, to the EAR Foundation of Arizona's **HEAR for Kids®** Program. This information, including this form, may be sent via electronic mail, fax or other mean of data transmittal. Information specific to your child and his/her hearing loss maybe shared with other medical, audiology and early intervention professionals or agencies. Information that doesn't specifically identify your child may be published, reviewed for utilization, quality assurance or used to pursue funding for the program.

Parent or Guardian: \_\_\_\_\_ Date \_\_\_\_\_

**HEAR for Kids® Loaner Fitting Form**