Autism™
NEW JERSEY

Sibling Pen Pal Program

The Sibling Pen Pal Program is a great and easy way to connect siblings so that they can share stories, successes and challenges of living with a brother or sister with autism. To join the program, complete this sign-up form. Include the children's ages, hobbies and any other information you think would be helpful in making a good pen pal match. Feel free to photocopy this sheet or use extra paper. You will hear from an Autism New Jersey staff member soon.

Send all correspondence to:
Autism New Jersey
Attn: Gale Rainier
500 Horizon Drive, Suite 530
Robbinsville, NJ 08691
Fax: 609.588.8858

Register online at
www.autismnj.org

Sibling Name _____ Male/Female _____ Date of Birth _____

Hobbies (Please list 3) _____

_____

_____

Name of child with autism _____ Male/Female _____ Date of Birth _____

Address _____

Phone _____ Sibling's E-mail _____

Parent's Name _____ Parent's E-mail _____

Parent's Signature _____ Date _____