MSAA CHILDREN’S COOLING APPLICATION

Why is cooling important to people with multiple sclerosis?
Many people with multiple sclerosis are heat sensitive. MS research has proven that heat and humidity often aggravate common MS symptoms. MS research has also proven that cooling the body can help lessen the negative effects of heat and humidity on a person with MS, although this research is based on adults diagnosed with MS.

How do you cool the body?
The most common cooling product is a vest that contains insulated pockets which hold small ice packs which freeze at 32 degrees Fahrenheit. Individuals with MS who wear these vests often experience temporary cooling relief which allows them to enjoy the outdoors during the summer.

How does a children’s cooling vest differ from standard cooling vests?

**Size:** Standard cooling vests come in adult sizes ranging from adult small to double extra-large. The children’s cooling vests are designed to fit children and pre-teens up to 100 lbs.

**Cooling:** Rather than using ice packs which freeze at 32 degrees Fahrenheit, a children’s cooling vest uses ice packs that freeze solid at a moderate, safe temperature of 58 degrees Fahrenheit. These cooling packs release their cooling energy at this consistent and comfortable temperature for up to three hours. They can be frozen in a freezer, refrigerator or bucket of ice water. Packs are non-toxic and non-flammable.

If you have additional questions about pediatric MS, please call MSAA at (800) 532-7667.

You must complete steps 1 thru 5 and return all required documents to MSAA.

**Step 1** Complete the Personal Data Form (separate sheet)

**Step 2** Complete the Income Eligibility Section

**Step 3** Complete the Cooling Application

**Step 4** Get a prescription or letter from your doctor that verifies your child’s diagnosis of MS and include it with this application

**Step 5** Read and sign the Cooling Equipment Terms Agreement
MSAA COOLING PROGRAM APPLICATION FORM

Child’s Name: ___________________________________ Date of Birth: ____________________

Parent/Guardian Information:

Name: ___________________________________ Phone: (___) ___________ Date: __________
Address: ____________________________________________

INCOME ELIGIBILITY

Part A. YEARLY FAMILY INCOME is defined as all earned wages and other reported income (i.e. disability, pension, alimony, child support, etc.) from last calendar year.

Our Yearly Family Income is: $_____________________.

The total number of people living in my household is: _____________.

Part B. Based on the information above, check the chart to see if your income is below the listed amount. If so, proceed to Part C and continue the application.

MSAA’s Yearly Family Income Guidelines 
(based on 3x the federal poverty level)

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<thead>
<tr>
<th>Persons living in the Household</th>
<th>Income</th>
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<tbody>
<tr>
<td>1</td>
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<tr>
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<td>3</td>
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<tr>
<td>7</td>
<td>$117,030</td>
</tr>
<tr>
<td>8</td>
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</table>

Part C. Please Sign Below:

By my signature below, I (the parent/guardian of the applicant) hereby certify that the information provided to MSAA is true and accurate to the best of my knowledge. I also understand that MSAA has the right to request written income verification if needed and/or deny this application if the required information and signature are not provided or the income exceeds our limits.

Signature: ____________________ Date: ____________________
PRODUCT SELECTION – **Choose Only One Vest**

**Children’s Zipper-Style Cooling Vest**

- Worn over clothing. Adjustable at the shoulders, chest and waist.
- One size fits children up to 100 lbs. with a chest or waist circumference of 26” to 42”. Vest length can be adjusted from 15.25” to 17.25”.
- Vest weight is adjustable by varying the use of cooling packs. Weight is 2 lbs. (with 3 packs) and 2.75 pounds (with 4 packs). Cooling packs are 6” x 6”.
- Includes Neck Collar (color will match vest selection).

**Must choose color:**

- __Polar Pink__
- __Arctic Blue__
- __Kodiak Khaki (not shown)__

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**MSAA COOLING EQUIPMENT TERMS AGREEMENT**

By my signature below, I, the parent/guardian for the recipient of this equipment, understand and agree:

1. That the Multiple Sclerosis Association of America, Inc. (MSAA) is not obligated to provide any or all of the products I have requested. MSAA retains the right to make the final determination on which products to distribute.
2. That some products are restricted to size, therefore the MSAA is neither responsible nor liable for fitting me.
3. That upon receipt of equipment, I will inspect the equipment and notify MSAA of any problems or damage that may have occurred during shipping.
4. That I will release and hold harmless MSAA, its officers, employees, agents and members from any injury(ies) or loss(es) that may occur from the use or misuse of the equipment/items provided by MSAA.
5. That the equipment distributed to me will become my sole responsibility, and that all maintenance, repairs and replacements are my responsibility.
6. That I am responsible for notifying the MSAA of any name, address or telephone number changes that occur while I am in possession of any equipment belonging to MSAA.
7. That the personal and medical information I have voluntarily provided to MSAA may be used or shared for the sole purpose of acquiring the service or benefit I have requested. I understand MSAA’s policy is to strictly maintain the confidentiality and security of all personal information.

I have read, understood and agreed with each of the terms and descriptions as stated above:

Name: _____________________________  Signature: _____________________________  Date: __________

**Manufacturer Information:**  Polar Products - 800-763-8423; www.polarproducts.com

Return to: MSAA, 375 Kings Highway North, Cherry Hill, NJ 08034.  Fax: 856-488-8257.