

Diaper Baby

Mobile Wellness Program

A partnership between the DC Diaper Bank, Bowie State University, School of Nursing and the Greenbelt Assistance in Living Program (GAIL)

- This **free** program is open to low-income families, with children ages birth - two years of age, who wear diapers, and live in incorporated Greenbelt.
- Participants will receive up to 3 home visits, (one visit every other week), from student nurses.
- Home visits will be scheduled on Thursdays between the hours of 9:00 a.m. - 3:00 p.m. and begin Thursday, June 21st.
- Nurses will call families to schedule their first home visit on Thursday, June 14th.
- Free services offered include:
 - Diapers delivered to family each visit
 - Baby Wellness Nursing Assessment
 - Information and Resource Linkage
 - Baby Milestone Progress Review
 - Healthy Eating Education
 - Medication Safety
 - Formula and Baby Accessories monthly



To enroll please call **Katherine Farzin, Community Outreach Manager** to register **240-542-2019** or **kfarzin@greenbeltmd.gov**





Diaper Baby Mobile Wellness Program Registration Form



The City of Greenbelt's Assistance in Living Program is partnering with the DC Diaper Bank and other community partners to offer a Pediatric Wellness Program to families in our incorporated Greenbelt community. Program participants will receive a variety of baby items, including diapers, in addition to a wealth of health & wellness information.

Please complete the form below and return the form to our office - City of Greenbelt - GAIL Program | 25 Crescent Road, Greenbelt, MD 20770.

Student nurses will contact participants the week prior to schedule the first home visit.

Participant Name: _____ Phone Number: _____

Greenbelt Address: _____

Email Address: _____

Family Size: _____ # of adults: _____ # of children age 2 and under: _____

Primary Language Spoken in the home: English _____ Spanish _____

Child's Name	Age	Boy/Girl	Date of Birth	Diaper Size	Formula Type
1.)					
2.)					
3.)					
4.)					
5.)					



What products are you and your family in the most need of? (Check all that apply.)

_____ Pads

_____ Tampons

_____ Baby Proofing Items

_____ Toys

_____ Breast Pumps

_____ Bottles

_____ Strollers (Include Child's weight)

_____ Sippy Cups

_____ Children's Books

_____ Baby Carrier (Include child's weight)

_____ Bouncy Chairs (Include Child's weight)

_____ Other:



Thank You for Registering!

This program is brought to you by the partnership between

