

## Circle Member Agreement

I, \_\_\_\_\_, as a member of  
(Name, First & Last)

\_\_\_\_\_’s circle of support, agree to  
(Name of Circle Leader\*)

meet the expectations listed below. This means that I will complete my list of tasks within the time frame that will be decided on together by the Circle Leader and me.

- I will attend Circle of Support meetings that are required twice per year (usually every 6 months). \_\_\_\_\_  
Initial Here (Circle Member)

- I will attend additional scheduled Circle of Support meetings that are agreed upon by the Circle members or scheduled as special situations come up. \_\_\_\_\_  
Initial Here (Circle Member)

- I am available to offer additional support in the following area(s): \_\_\_\_\_

\_\_\_\_\_  
Initial Here (Circle Member)

I, \_\_\_\_\_, agree as the Circle Leader  
(Circle Leader’s Name, First & Last)

to provide meeting details in advance with at least

\_\_\_\_\_ weeks’ (or) \_\_\_\_\_ months’ notice. \_\_\_\_\_  
Initial Here (Circle Member)

**\*Circle Leader = person with disabilities who the meeting is about**

# Circle Member Task Tracker

Task: \_\_\_\_\_

Will be completed by (date): \_\_\_\_ / \_\_\_\_ / \_\_\_\_      \_\_\_\_\_  
Initial Here  
(Circle Member)

Task: \_\_\_\_\_

Will be completed by (date): \_\_\_\_ / \_\_\_\_ / \_\_\_\_      \_\_\_\_\_  
Initial Here  
(Circle Member)

Task: \_\_\_\_\_

Will be completed by (date): \_\_\_\_ / \_\_\_\_ / \_\_\_\_      \_\_\_\_\_  
Initial Here  
(Circle Member)

\_\_\_\_\_  
Circle Leader Signature

\_\_\_\_ / \_\_\_\_ / \_\_\_\_  
Date

\_\_\_\_\_  
Circle of Support Member

\_\_\_\_ / \_\_\_\_ / \_\_\_\_  
Date