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|--------------------------|---------------------------|--|
| Participant's Details | Name | |
| | Participant's Contact No. | |
| | Address | |

EASY READ RIGHTS

WHAT DO YOU KNOW ABOUT
YOUR RIGHTS?



This Document is about Your **Rights**.



Our laws need to respect the rights of people with disability.

You should be included in community life.

You have the same rights as everyone.



What are your **rights**?



You should be:

- safe in your home and anywhere else
- treated with respect
- part of your cultural community



You should be able to:

- participate in your religion
- express your sexuality
- communicate in your family's language



You should be able to:

- make complaints
- able to say you want to go to another provider



You can tell us what you want and when you want it.



You can tell us what type of worker you want.

You can tell us how you want things done.



We will always follow your instructions, unless we feel that you may get hurt then we will talk to you or your trusted person about the risk.



We agree to follow your wishes and
Charter of Rights.