

Summer 2010

summer schedule will begin June 15th

Social Skills Groups - Focus of social skills groups include but are not limited to the following: not dominating conversation, recalling/retaining information provided by a peer, relatedness to others, appropriately expressing feelings/recognizing emotions in others, following directions, attending behaviors/readiness skills, and more! Each group will meet weekly for 45 minutes and are provided with opportunities to sing, dance, play instruments, and make friends. If you will not be able to attend certain weeks due to vacations or other scheduled events, please let the therapist know so that you will not be charged. Times TBD \$60/session

Group Options:

- Group 1 will consist of children ages 4-6 who are moderate to high functioning.
- Group 2 will consist of children ages 7-10 who are moderate to high functioning.
- Group 3 will consist of children of various ages who are low functioning.

Individual Therapy- Focus on all domain areas: gross/fine motor, communication, behavioral, cognitive, emotional, and quality of life needs. Sessions for 45 minutes, weekly and provide opportunities to sing, dance, play instruments, and enjoy therapy in a new way. If you will not be able to attend certain weeks due to vacations or other scheduled events, please let the therapist know so that you will not be charged. Times TBD. \$75/session

Music Lessons- Focus on music education through a specific instrument. Participant (all ages/abilities welcome) will learn the technique associated with their instruments as well as much theory. 30 or 45 minute slots available. Times TBD. \$25/30 minute lesson or \$35/45 minute lesson.

- Piano lessons
- Guitar lessons
- Voice/singing lessons
- Drum set lessons or hand drums

Please mail this form to 260 Gateway Drive Suite 5A Bel Air, MD 21014 with a \$20 deposit to hold your spot by May 15, 2010. Registration will take place following the 15th, but space may be limited. Group therapy must have at least 3 children registered to take place. More times will be added as needed. If you cannot make the times indicated, please state so when mailing in your form.

Child's name: _____ Date of birth: _____
Responsible party: _____ Relationship: _____
Referred by: _____ Address: _____
Home phone: _____ _____
Cell phone: _____ _____
E-mail address: _____