

Mini Club Registration Form 2016

Cost \$225 plus one-time \$60 Registration Fee for New Families (\$285)

Coping Mini Club

Tweens Ages 10 - 12 Time: 2:00 - 3:30 Teens Ages 13+ Time: 3:30 - 5:00 4 Weeks 3/5, 3/12, 3/26, 4/2

Early Bird Special! **Register with payment** by 2/12/16 and save 15%!!

Anxiety and stress can stop our kids from enjoying life. Some brains are so busy thinking and worrying that it's hard for them to find solace in their own minds. Kids will learn coping skills to understand what causes anxiety, how it manifests in thoughts, feelings, and behavior and they will learn powerful strategies to manage stress. Kids will begin to understand how to calm their minds and bodies by learning mindfulness techniques.

Personal Power Club

Tweens Ages 10 – 12 Time: 2:00 - 3:30 Teens Ages 13+ Time: 3:30 - 5:00 4 Weeks 4/9, 4/16, 4/30, 5/7

Participants will find their personal power and increase self-esteem by understanding that their choices make them powerful. They will examine feelings and how to manage very strong feelings while gauging their reactions to situations. They will learn to stick p for themselves in a productive, friendly manner. They will be given language to use in such situations and practice through role playing. Performing random acts of kindness is an excellent way to promote self-esteem. In the club, kids will be assigned kindness tasks.

Drop Off & Pick Up: Parents are asked to stay in the parent waiting area for the first 30 minutes of the first session as we become acquainted with your child. Parents may drop off for subsequent sessions but should stay within 15 minutes of the center. To hear a summary of the group, plan to pick up 10 minutes early to hear the facilitator overview. If you need a more in-depth conversation, a future appointment may be needed since our groups often run subsequently.

Attendance, Closings, Missed Sessions: The clubs have set dates and no make-up groups are available due to the specialty nature of the clubs but we will offer your child an opportunity to attend one of our weekly social groups for missed sessions. Simply Social Kids usually closes if Tyngsboro closes due to weather. We will verify through e-mail and on Facebook. We may also close if a social coach is unable to facilitate due to illness or emergency. If your child misses group due to their illness or other commitment, <u>we are unable to provide a refund for a missed group</u>. Every effort will be made to provide a substitute class. Please text, call or leave an e-mail message if your child will be absent. Text or call 978-764-2758.

Registration process includes a phone interview with Director, Nadine Briggs: 978-764-2758, <u>nbriggs@simplysocialkids.com</u> Mail completed registration form and \$225 for each 4 week program: Nadine Briggs, Director, Simply Social Skills, LLC One Industrial Way, Unit 4, Tyngsboro, MA 01879



Registration Information

Child's Name:	Age:	Child's DOB:	M or F	
Requested Group Day/Time:	Expected Start Date			
Address:	City, ST, Zip: _			
Telephone: Sibli	ngs (name/age)			
Parent Name:	Parent Nam	ne:		
Parent Cell:	Parent Cell:			
Parent E-Mail: (At least one parent's e-mail is required)		ail:		
Disability Diagnosis:(optional) School				
Does your child receive special education services (IEP/5	i04)? Yes No_			
How did you learn about us? (If via a public flyer or post c information)				
Please answer the following questions to ensure the safe discussed with program facilitator): My child has food-related allergies or special diet yes				
Participants are welcome to send a peanut-free snack wit	th their child as no fo	ood will be supplied by Simp	ly Social Skills,	
My child has medical issues that may affect his/her safety specify		seizure disorder, etc.) yes	no	
Emergency Contacts:				
Name: Cell:		Relationship:		
Name: Cell:		Relationship:		
Simply Social Kids One Industrial Way, Unit 4, Tyngsbo	oro, MA 01879 978-76	4-2758 nbriggs@simplysocialkids.	com	

Parent Agreements

Participation Requirements

Please check each box to indicate that you understand and comply with the participation requirements for

(Child's Name)

- My child does not require one-on-one adult attention for safety or participation in a group of 8-10 participants •
- My child does not have a current history of physical aggression toward others or having to be restrained for • aggressive or bolting behaviors
- My child is fluent in their use of language and refrains from using profanity
- My child is interested in socializing with others
- My child is able to independently take care of restroom needs
- My child does not have any history of mental health issues or psychosis as we are not mental health providers
- I understand that if the program is not a good fit for my child due to the any of the reasons above, a refund will not be given
- I understand no refunds are given for missed groups •

Parent/Guardian Signature

Participation requirements are for the safety of the children. Simply Social Kids staff are not trained to address issues of physical aggression toward others. We are not mental health professionals as we are social skills coaches. Contact us if you're uncertain about the participation requirements to discuss your situation.

Photo Use Authorization (optional)

Yes, I grant permission for Simply Social Skills, LLC to photograph	and for those photos to be
published on social media (ex. Facebook) and other marketing vehicles such as brochures	s, postcards and web sites.

No, I **DO NOT** grant permission for Simply Social Skills, LLC to photograph and for those photos to be published on social media (ex. Facebook) and other marketing vehicles such as brochures, postcards and web sites.

Parent/Guardian Signature_____ Date _____

Pick Up Permission (Photo IDs will be required)

The following people have permission to pick up my child from group (include spouse):

Name

Name_____

Parent/Guardian Signature Date

Drop Off & Pick Up: Parents are asked to stay in the parent waiting area for the first session as we become acquainted with your child. Parents may drop off for subsequent sessions but should stay within 15 minutes of the center. To hear a summary of the group, plan to return 10 prior to pick up to hear the facilitator overview. If you need a more in-depth conversation, contact us to schedule an appointment.

Missed Sessions: We are unable to provide refunds for missed groups.

I understand and agree to participation requirements, drop off & pick up, attendance, closings, missed sessions, group formation and payment polices. In case of injury, I do hereby waive all claims or legal actions, financial, or otherwise against Simply Social Skills, LLC, Nadine Briggs or any contractor, employee or volunteer connected with the program. In absence of a signature, registration and participation in the program shall constitute acceptance of the conditions set forth in the release. I understand that refunds will not be given for missed classes.

Parent/Guardian Signature_____

Date



Date

Name

Name_____