

KaraLee & Associates, P.C. Social Skills Summer Group Registration

If you have any questions about completing this information, please call (734) 451-3440 and ask for Kristin Hnatio or email khnatio@yahoo.com.

Scan and email completed packets to khnatio@yahoo.com or fax to (734) 451-8720

Select Session:

Session Price: \$400

□ **Group 1: Social Skills**

June 20 to June 22

June 27 to June 29

4:00pm to 6:00pm

□ **Group 2: Social Skills**

July 25 to July 27

August 1 to August 3

9:00am to 11:00am

□ **Group 1: Executive Functioning**

July 11 to July 13

July 18 to July 20

4:00pm to 6:00pm

Fees:

A \$200 non-refundable deposit is required to register your child for the group and the deposit will be applied toward the total fee. Payment is due in full on or before the first day of the group. Payment is not accepted for individual sessions as the skills taught build upon one another. *We do not accept or process any insurance claims at this time for groups.*

Attendance:

By registering for a group, you are committing to pay all six sessions even in the event that your child becomes ill or is unable to attend a session.

Supplies:

All supplies required for the group will be included in the registration fee. A light snack will be provided. Please note any allergies below.

Child Information – Summer Groups

Child's Name: _____ Date of Birth: _____

Mother's Name: _____ Mother's Phone: _____

Father's Name: _____ Father's Phone: _____

Mother's Email: _____ Father's Email: _____

Address: _____ City/Zip Code: _____

Current KaraLee Patient: Yes No If yes, therapist name: _____

Current Educational Setting: Public School Private School Home Schooled Combination

Current Services: Speech OT PT Resource Room Other: _____

School Name and Location: _____

Siblings' Names(s) and Age(s): _____

What are your current concerns about your child's social skills? _____

What social skills do you think your child would benefit from most? _____

Please list the classes or topics your child does BEST in at school: _____

Please list the classes or topics your child struggles the most with at school: _____

What is his/her favorite class/club/activity? _____

What is his/her least favorite class/club/activity? _____

Current Diagnosis: _____

Diagnosing clinician: _____

Food Allergies: _____

Dietary Restrictions: _____

Please rate your child on a 1-5 scale (5 = great performance/understanding)

	Paying attention to others		Understanding personal space
	Asking questions about others		Participating in a group
	Making eye contact		Accurately identifying facial expressions
	Understanding the feelings of others		Accurately identifying body language
	Showing empathy		Greeting others
	Listening		Participating in conversation
	Understanding what people mean by what they say		Quality of information provided
	Doing homework		Adding relevant comments to a conversation
	Turning in homework		Apologizing
	Keeping backpack organized		Asking for help
	Keeping school desk/locker organized		Personal problem solving
	Taking responsibility for self		Compromising and/or negotiating
	Understanding consequences		Doing chores

Please check all characteristics that describe your child.

	Unmotivated		Oppositional
	Anxious		Physically aggressive
	Externally distracted		Verbally aggressive to peers or adults (describe)

Impulsive	Physically aggressive when upset towards adults
Rigid (my way or the highway attitude)	Verbally aggressive towards adults
Aloof/internally distracted	Withdrawn (may hide or emotionally shut down when upset)
Other:	Other:

Please check which characteristics best describe your child:

	Yes	No
Engages with peers	<input type="checkbox"/>	<input type="checkbox"/>
Understands that his/her actions affect others	<input type="checkbox"/>	<input type="checkbox"/>
Leader	<input type="checkbox"/>	<input type="checkbox"/>
Follower	<input type="checkbox"/>	<input type="checkbox"/>
Does not share with others	<input type="checkbox"/>	<input type="checkbox"/>
Has difficulty making friends	<input type="checkbox"/>	<input type="checkbox"/>
Overreacts when faced w/problem	<input type="checkbox"/>	<input type="checkbox"/>
Lacks self-control	<input type="checkbox"/>	<input type="checkbox"/>
Is over stimulated while playing	<input type="checkbox"/>	<input type="checkbox"/>
Short attention span	<input type="checkbox"/>	<input type="checkbox"/>
Hides feelings	<input type="checkbox"/>	<input type="checkbox"/>
Impulsive	<input type="checkbox"/>	<input type="checkbox"/>
Uncomfortable meeting new people	<input type="checkbox"/>	<input type="checkbox"/>
Requires a lot of 1:1 attention	<input type="checkbox"/>	<input type="checkbox"/>

Emergency Contact: _____

Phone: _____

Relationship to Child: _____

Other adults permitted to pick up your child:

1. _____
Print Name Clearly

2. _____
Print Name Clearly

3. _____
Print Name Clearly

4. _____
Print Name Clearly

I agree to follow the fee schedule and policies as noted:

Cost of Social Skills Group:

Two-Week Social Skills Summer Group (six sessions): \$400

Please Initial Every Section

Absences and Missed Sessions:

Clients planning vacations must understand that by signing up for a summer sessions you are committing to pay for the entire program even if you are not able to attend all of the sessions.

Payment Policy:

All social skills services must be paid for by the guardian of the client as we do not bill insurance companies for group services rendered. Cash, check, and credit card payment is accepted. *Payment for the group is due in full on or before the first day of the session. Payment in full is the responsibility of the client.* There is a \$25.00 charge for returned checks.

Deposits and Cancellation Fees:

The \$200 non-refundable deposit will be applied towards the child's balance for the social skills group. For cancellations after the program starts, the entire program fee is non-refundable.

I have reviewed the KaraLee & Associates, P.C. Social Skills Summer Group policies above and hereby give my consent for my child to participate in the group.

Signature

Date

Please return the following to: Attention: Kristin Hnatio

Email: khnatio@yahoo.com

Mail: 1308 South Main Street, Plymouth, MI 48170

- \$200 deposit
- Group Registration Forms
- KaraLee & Associates, P.C. Child Registration Forms