



M O T I V A T I O N A L
U N I Q U E
S E N S O R Y
I N T E R A C T I V E
C O M M U N I C A T I O N

Summer Registration 2008

SEND COMPLETED REGISTRATION FORM AND \$50 DEPOSIT TO SECURE YOUR SPACE

Date:

Client Name:

Date of birth:

Communication Skills

What are your child's current communication skills?

Do you use any communication tools such as PECS or visual schedules?

Interests

What are your child's ...

Strengths?

Challenges?

Interests?

Dislikes?

Behaviors

What does your child do when upset?

Are there any phrases or activities that are generally calming to your child?

Does your child have any fears or sensitivities we should be aware of?

What are some of the current goals you have for your child (school or home)?

(list 3)

1.

2.

3.

Name:

Phone: Home:

Cell:

Work:

Address:

Email:

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