

The Peter Pan Center for Social & Emotional Growth

# Summer 2019 Social Groups (with fun themes!)

Participant Information:

Child's Name: \_\_\_\_\_

Age: \_\_\_\_\_

Parent Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, ST, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

E-Mail: \_\_\_\_\_



Allergies or Dietary Restrictions? \_\_\_\_\_

Medications (example Epi Pen?) \_\_\_\_\_

New participants at the Center must meet our guidelines for participation on the waiver form and are encouraged to schedule a visit prior to registering for our social skills programs to ensure it is a good fit for your child. If your child is a little younger or older and you would like them to attend a specific group, we would be happy to discuss the possibility with you.

## The Peter Pan Center Summer 2019 Social Groups

Check group choice(s) below. To mix and match, check the groups and circle the dates.

Program	Day(s)	Time	Dates
<input type="checkbox"/> Pokémon Pals (Ages 7+)	Tuesdays	12:30-1:45 PM	7/9, 7/16, 7/23, 7/30 & 8/6
<input type="checkbox"/> Settlers of Catan (Ages 9+)	Tuesdays	2:30-3:45 PM	7/9, 7/16, 7/23, 7/30 & 8/6
<input type="checkbox"/> Card Sharks - Younger (Ages 7+)	Tuesdays	2:30-3:45 PM	7/9, 7/16, 7/23, 7/30 & 8/6
<input type="checkbox"/> Magic the Gathering (Ages 9+)	Tuesdays	4:30-5:45 PM	7/9, 7/16, 7/23, 7/30 & 8/6
<input type="checkbox"/> Card Sharks - Older (Ages 10+)	Tuesdays	4:30-5:45 PM	7/9, 7/16, 7/23, 7/30 & 8/6
<input type="checkbox"/> Minecraft Minds (Ages 7+)	Wednesdays	2:30-3:45 PM	7/10, 7/17, 7/24, 7/31 & 8/7
<input type="checkbox"/> Recess Roundup (Ages 7+)	Wednesdays	4:30-5:45 PM	7/10, 7/17, 7/24, 7/31 & 8/7
<input type="checkbox"/> Poetry Ignites! (Ages 10+)	Wednesdays	4:30-5:45 PM	7/10, 7/17, 7/24, 7/31 & 8/7
<input type="checkbox"/> Relax with Yoga (Ages 7+)	Wednesdays	6:30-7:45 PM	7/10, 7/17, 7/24, 7/31 & 8/7
<input type="checkbox"/> Disney Lovers (Ages 7+)	Thursdays	12:30-1:45 PM	7/11, 7/18, 7/25, 8/1 & 8/8
<input type="checkbox"/> Dungeons & Dragons (Ages 9+)	Thursdays	2:30-3:45 PM	7/10, 7/17, 7/24, 7/31 & 8/7
<input type="checkbox"/> Sci Fi Guild (Ages 9+)	Thursdays	2:30-3:45 PM	7/11, 7/18, 7/25, 8/1 & 8/8
<input type="checkbox"/> Art of Anime & Manga (Ages 9+)	Thursdays	2:30-3:45 PM	7/11, 7/18, 7/25, 8/1 & 8/8
<input type="checkbox"/> Swords of Chivalry (Ages 9+)	Thursdays	4:30-5:45 PM	7/11, 7/18, 7/25, 8/1 & 8/8

Summer social skills groups will be co-facilitated by Donna Shea, Social-Emotional Learning Specialist, and an adult with expertise in each theme. Email [dshea.peterpancenter@gmail.com](mailto:dshea.peterpancenter@gmail.com) or call 978/413-1965 with questions.

Groups meet weekly, for 5 weeks. Tuition per group is \$312.50. A minimum of 4 participants and maximum of 6 per program. Mix and match groups and dates for \$62.50/session. Mail this form and a check made out to Donna Shea to: The Peter Pan Center, P.O. Box 312, Harvard, MA 01451



**Turn over for Waiver & Release Form – Thank you!**

## Waiver and Release of Liability for Program Participation at the Peter Pan Center

Please fill in and provide your signature below if your child will be participating in programs at the Center.

I, \_\_\_\_\_ (parent's name), parent/guardian of  
\_\_\_\_\_ (child's name), hereby grant permission for  
his/her participation in programs at the Peter Pan Center and release the Peter Pan Center and Donna Shea  
and any other provider of this service, from liability for the standard type of unforeseeable accidents such  
as between-peer-child incidents, communicable colds, etc., "acts of God"/weather, and other similar  
accidents.

If an accident requiring urgent medical treatment occurs, I agree to allow the program facilitator to call an  
ambulance on my child's behalf and release the specifics of the incident to the treating hospital. I am  
providing my child's current health insurance information if needed.

Name of Health Insurance Carrier: \_\_\_\_\_  
ID # \_\_\_\_\_

I also confirm that my child meets all the guidelines for participation (please check).

- My child is fluent in his/her expressive and receptive language skills
- My child does not need one-to-one attention for safety
- My child can transition in and out of the program without incident and does not have a history of bolting
- My child does not have a history of significant physical or verbal aggression towards peers and others
- My child is interested in socializing with other children
- My child can independently take care of restroom needs
- I permit my child to walk to the local playground (weather permitting) with staff

I understand that if my child has issues with bolting or aggression that I do not disclose and is aggressive  
with staff or other children or creates a dangerous situation by attempting to leave the Center, that my  
child may be asked to discontinue participation in the program without a tuition refund.

Parent Signature: \_\_\_\_\_

Date: \_\_\_\_\_