

Cool Cats 2012

Developing coping & social skills for children with anxiety 5 thru 9 years old

Staying Cool is an effective small Occupational Therapy group program focusing on developing coping skills and strategies with children demonstrating anxiety and/or stress in relation to school, change, peers and/or other aspects of everyday life. This program will include relaxation activities, music and movement, arts and crafts, feelings exploration, and cognitive/behavioral strategies. It will be led by two occupational therapists and limited to six children.

NOTE: This program is designed for children who are easily overwhelmed and is not appropriate for high-energy children who might better be served in one of our Explorer programs.

- Goals include:**
1. Develop comfort participating in a small group setting.
 2. Identify feelings in different situations.
 3. Develop self-coping skills for dealing with stressful situations.
 4. Learn sensory-based strategies that may reduce anxiety.
 5. Develop age appropriate social skills and friendships.

When: 9 weeks: June 11 – Aug 13 (*will not met July 2*)

Days: Mondays

Time: 3:00 - 4:30 p.m.

Cost: \$645 (We understand that your child may miss one or more weeks due to vacation. In order to keep the cost low, it is offered only as a flat rate with no make-ups or refunds.)

To register return form with \$325 deposit to reserve your child's spot. Please fill out the back of this form to provide us with information to better help your child.

Please register my child, _____, for the **Staying Cool** program.

My child will be attending _____ (school) in the fall. DOB: _____

Parents Name(s): _____

Address: _____

Phone #: (h) _____ (w) _____ (c) _____ Best time to call: _____

Does your child currently receive occupational therapy or psychological services? _____

Where? _____ **Or in the past?** _____

Emerge - A Child's Place

I am interested in enrolling my child in the Staying Cool program because:

My child demonstrates anxiety/stress regarding:

Strategies that help my child:

List any sensory processing challenges that your child has:

List any diagnoses (formal or informal) that your child has:

List any dietary restrictions that your child has:
