



# SENSIBLE DEVELOPMENT

110 Airport Road, Suite 102, Westerly, RI 02891

## 2017 Group Registration Form

Child's Name: \_\_\_\_\_ Male  Female  Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip Code

### Parent/Guardian Information

Parent/Guardian:	Parent/Guardian:
Home Phone:	Home Phone:
Cell Phone:	Cell Phone:
Email:	Email:
Best Method of Contact: <input type="checkbox"/> Home phone _____ <input type="checkbox"/> Cell Phone of _____ <input type="checkbox"/> Email of _____ <input type="checkbox"/> Work Phone of _____	
Child lives with:	
Others living in the home:	

### Emergency Contact Information

Emergency Contact Name (other than parents): \_\_\_\_\_

Relation: \_\_\_\_\_ Emergency Contact Phone Number: \_\_\_\_\_

**Please complete the following information to help us place your child with the best peer group for his/her needs. Please note that every applicant may not be placed in a group and your child's participation is not guaranteed until you receive confirmation.**

Please indicate your concerns and/or reasons for seeking group services for your child:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Does your child have a diagnosis? Yes  No  If so, please indicate: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Does your child have any experience participating in organized activities including school, preschool, sports, music or art classes, library groups, etc.? Yes No If yes, please describe:

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How does your child communicate with others?

Non Verbal communicator

Verbal Communicator

How does your child behave around other children?

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How long can your child attend to adult directed activities?

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What is your child's activity level? Fast Slow Just Right

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What strategies or supports help your child to be successful in social activities?

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Does your child have any special interests or motivators?

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What does your child have difficulty with?

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What are your child's strengths?

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Any other information that you would like to share?

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**This form was completed by/relationship to the child:**

**Today's Date:**

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