

# Social Butterflies - Summer 2017

*DEVELOPING  
SOCIAL & PLAY SKILLS*  
FOR CHILDREN 5 THRU 7 YEARS OLD

Social Butterflies is a small group therapy program focusing on developing the communication and play skills needed to navigate peer interactions and peer play appropriately. Through building awareness of play with others, group members will learn how to expand upon parallel play, focusing on cooperative and reciprocal play with peers. This program will include learning opportunities for peer perspective taking, turn taking and sharing, and understanding consequences and changes that may occur during peer play. This program will include social communication and sensory motor activities in the small sensory gym, games, arts and crafts incorporating concepts from Michelle Garcia Winner's Social Thinking® curricula. The group is co-led by an occupational therapist and speech and language therapist, and will be limited to six children in order to provide individualized attention.

## **Goals include:**

- Understanding concepts of Social Thinking Curriculum
  - Thinking Thoughts and Feeling Feelings
  - The Group Plan
  - Thinking With Your Eyes
  - Body in the Group
  - Whole Body Listening
- Recognition of emotions
- Expansion of parallel play to cooperative/reciprocal play
- Tolerating challenges during play
- Turn taking/sharing/personal space
- Understanding consequences during peer play

## **REGISTRATION INFORMATION**

**WHEN:** Thursdays, June 22<sup>nd</sup> - August 17<sup>th</sup> (no session on July 6<sup>th</sup>)      **TIME:** 3:30-5:00PM

**COST:** \$1,050

In order to keep the cost low, this program is offered as a flat rate with no make-ups or refunds. We understand that your child may miss one or more weeks due to vacation and the cost has been established with that in mind. *You may be able to seek reimbursement from insurance for OT services from your insurance provider.*

(If your child is not attending therapy sessions at Emerge, we will be in touch with you to set up a brief free screening to determine if this program is a good match for your child.)

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## REGISTRATION FORM

Child Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Parent Name(s): \_\_\_\_\_

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

\_\_\_\_\_

Phone Numbers: (h) \_\_\_\_\_ (c) \_\_\_\_\_

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

My child attended \_\_\_\_\_ (school) this year. N/A \_\_\_\_\_

S/He will be attending \_\_\_\_\_ (school) in the fall. Grade: \_\_\_\_\_

Does your child receive any special services at school? \_\_\_\_\_

### DOES YOUR CHILD:

Attend therapy sessions at Emerge? *Yes / No* Receive services elsewhere? *Yes / No*

If so, where? \_\_\_\_\_ Please attach a copy of a recent report.

Have any allergies? *Yes / No* Please List: \_\_\_\_\_

Have trouble communicating? *Yes / No* Comments: \_\_\_\_\_

Does your child currently receive psychological services? *Currently: / Previously*

Where? \_\_\_\_\_

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## REGISTRATION FORM

I am interested in enrolling my child in the Social Butterflies program because:

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My child demonstrates challenges regarding:

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Strategies that help my child:

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List any sensory processing challenges that your child has:

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List any communication and/or social challenges that your child has:

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

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List any dietary restrictions that your child has:

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