

# THE FRIENDS NETWORK Presents...

## NEW THIS FALL FOR ALL CHILDREN WITH SPECIAL NEEDS



### Dance & Music Class with Ms. Suzanne

Thursdays for 10 weeks, 4-5pm  
9/24/09 to 12/3/09



Children will enjoy creative activities that involve music and movement. Each of these activities will touch upon the children's various needs & abilities.

**Suzanne Goggin** has her Masters in Special Education, Pre-K-6<sup>th</sup> grades, and her undergraduate in Elementary Education. She has 7 years experience working with children ages 3-12 and is currently teaching children ages 3-5. Suzann has studied ballet, jazz, and modern dance and was an Assistant Instructor with the Mahopac High School Dance Company.



### Kung Fu Class with Master Phil Sant

Wednesdays for 10 weeks, 4-5pm  
9/30/09 to 12/9/09

Martial Arts training is an excellent way to improve physical fitness, space perception, balance, agility, strength, coordination, and flexibility. Children will benefit being in an environment where they will learn self confidence as they develop improved motor skills, attention span, and body coordination.

**Master Phil Sant** has been working with children for over thirty years and is owner of the American Center for Chinese Studies in Brewster.



#### Children with disabilities participating in Dance or Kung Fu program:

- Need to be able to communicate their needs and wants
  - Should have some social abilities
- Should be able to follow simple direction with some adult prompting

If your child is on the HCBS Waiver there is no fee. For all other children the cost is \$180 for the one hour class, 10-week session. If you are interested in before and after care (from 3-6pm), cost including the class is \$350 for the 10 weeks. Tuition must be paid with registration **due by 9/21/09**. Each class will be limited to 10 students and we will accept applications on a first come, first serve basis.



8 Peach Lake Road, Brewster, NY 10509  
Tel. 845-278-0820

## Registration Form

### FALL CLASSES FOR ALL CHILDREN WITH SPECIAL NEEDS

Name \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Emergency Contact: Name \_\_\_\_\_ Phone # \_\_\_\_\_

WAIVER: This application has been completed and the information herein is correct as far as I am aware. The applicant has permission to take part in THE FRIENDS NETWORK Fall 2009 Dance or Martial Arts classes, except as noted by the examining physician or myself. I understand that every attempt will be made to contact me in case of an emergency. In the event I cannot be contacted, I give my consent to emergency x-rays and medical attention and treatments, surgery, or dental care for (child's name) \_\_\_\_\_. I also relieve THE FRIENDS NETWORK from any liability resulting from injury the applicant may sustain while participating in this program.

Parent / Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

#### Dance & Music Class with Ms. Suzanne

Thursdays for 10 weeks, 4-5pm  
9/24/09 to 12/3/09

##### Please sign my child up for the following:

- \_\_\_\_\_ One hour class, 10 week session, HCBS waiver enrolled, no fee
- \_\_\_\_\_ After-school care, 10 weeks, 3-6pm including one hour class, HCBS waiver enrolled, no fee
- \_\_\_\_\_ One hour class, 10 week session, non-waiver, \$180.00
- \_\_\_\_\_ After-school care, 10 weeks, 3-6pm including one hour class, non-waiver, \$350.00

#### Kung Fu Class with Master Phil Sant

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- \_\_\_\_\_ After-school care, 10 weeks, 3-6pm including one hour class, non-waiver, \$350.00

RETURN THIS REGISTRATION FORM WITH ATTACHED MEDICAL INFORMATION FORM AND CHECK (if necessary) BY 9/21/09 TO:

**The Friends Network, Inc., 8 Peach Lake Road, Brewster, NY 10509**

**Telephone 845-278-0820**