

*Thank you for registering for the Life Skills Program.  
Our programs focus on building and fostering resilience, promoting positive social skills and teaching emotional management strategies to your child.*

*Please complete fillable form below or print, complete & email to [register@lifeskillsforkids.net.au](mailto:register@lifeskillsforkids.net.au)*

**Parent's Details**

Parent Name (1):

Parent Name (2):

Mobile No (1):

Mobile No (2):

Email Address:

Postal Address:

**Child's Details**

Name:

DOB:

School Year:

Name of School:

**Program of Interest:**

Social &amp; Emotional Skills Comprehensive Weekly Program (6-12 years age)

Transition to High School Workshop (School Year 6)

Other (please specify):

**Main concerns / issues:**

Pre I/V date:

MC ☐ NDIS ☐ Nil ☐ HF ☐

Office use only

R ☐ n/a ☐

**Developmental Information:**

(E.g. Current / previous involvement with paediatrician, school psychologist, speech therapy, occupational therapy, individual psychologist). Please note any information here that may impact on your child's ability to participate in the group, such as attention / concentration issues, difficulty following instructions etc.

**Other relevant information** (e.g. family / medical issues / medication / allergies):

**Important Note:**

For the programs to be beneficial to both your child and the other group participants, it is important that they have a sufficient level of skill to manage their behaviour, including attention, concentration, and ability to follow instructions cooperatively.

Is this an area that your child has difficulty with at school or in other group settings?

No

Yes. If yes, please provide further details:

(If uncertain, this can be further assessed over the phone, as this is an important prerequisite of the program.)

## Group Expectations

To maximise the benefit and outcomes for your child and other group participants, please carefully read and check each box to indicate your understanding and agreement to the following expectations:

### ☐ Attendance (weekly group programs only)

Your child will benefit most from the group if he or she attends all six sessions as the skills learned build on each other. We therefore recommend that you make a commitment for your child to be at all sessions on time. Due to this expectation, refunds and rebates for missed sessions are not available. You will also be offered an individual follow-up session to discuss feedback approx. 6-8 weeks after the group. This allows sufficient opportunity for the children to practice and integrate the skills they have learned both at home and school, before we review together.

### ☐ Homework Task (weekly group programs only)

Your child will be given homework tasks on skills learned in the session to practice. Your support in completing these homework tasks will be most beneficial. As parents, you will be provided with weekly information sheets about the topics covered in the group.

### ☐ Folders / Workbooks (weekly group programs only)

Your child will be given a folder and workbook during the first group session. Please ensure that your child brings this folder and workbook with him/her at every session.

### ☐ Behaviour Management Policy

To maximise each child's learning, we utilise a positive approach, which includes a point system that they can trade for stickers, which assists them to manage their behaviour. If children continue to find it difficult to regulate their behaviour, we provide two reminders, and have a time-in procedure with one of the group leaders, to assist their return to the activity. In the unusual event that ongoing behavioural management difficulties have a significant impact on the child's learning and the whole group, parents will be consulted about the management, and continued participation in the program. If this occurs, refunds and rebates are not available. Please discuss any concerns about this policy with us at the initial appointment.

### ☐ Referrals & Rebates

If your child has been assessed as eligible for the Medicare Rebate, please bring the referral to the first appointment to be eligible for the full rebate. It is your responsibility to ensure that it is a valid referral (GP referrals are valid for 12 months; Specialist referrals are valid for 3 months). We will provide a written update following your child's attendance to your referrer.

No referral is required for private health rebates, if you have cover for clinical psychology services.

### ☐ Billing & receipts

Full fees are paid up front following confirmation of your child's place. Payment details provided at initial appointment. Receipts will be issued at session 6 and at the follow-up session. The reason for this is that the receipt can only be processed once your child has attended the sessions noted on the receipt.

Please indicate if you intend to self-claim any of the following rebates for billing purposes:

Medicare

NDIS

Private Health (specify fund):

### ☐ Acknowledgment & Consent

I (print name )

provide consent for my child

to be enrolled in the Life Skills for Kids Program following confirmation of place, and understand and agree to the above outlined information. I agree to these conditions for the psychological service provided by Life Skills for Kids.

Please note that any information that is gathered as part of initial assessment, group treatment, and subsequent appointment is seen only by the psychologists, and will remain confidential and secure.

Date:

Parent's / Guardian Signature :

Please email completed registration form to  
[register@lifeskillsforkids.net.au](mailto:register@lifeskillsforkids.net.au) for your child to be considered for  
upcoming programs. Limited Places.