

2022 - CFCE Summer Camp Information

We are excited to release our 2022 summer camp dates! This summer, we are offering several camps in Arvada and Loveland. All sessions will run Monday through Friday. The dates for each camp and the tuition rates are listed on the following registration form. We offer a discount for families who register for 4 or more weeks of camp.

Please have a look at the following registration form and respond with your commitment as soon as possible to hold your child's place. If you would like further information about Conductive Education and what the camp will entail, please do not hesitate to contact Jalyss Zapfletts or Jennifer Doyle at admin@conductiveed.com or (720)252-2299 for this information.

We need to know well in advance who is seriously interested in signing their child up for camp this summer so that we can arrange to hire Conductors and staff members for each camp to cover the number of children attending. Please understand that hiring the Conductors needs to be done months in advance for us to handle their visa requirements, flight, and hotel arrangements.

If you would like to sign up your child for camp, please fill in the registration form and return to CFCE by mail to: CFCE, PO Box 746297, Arvada, CO 80006 by April 15th, 2022. Forms can also be scanned and emailed to: admin@conductiveed.com. You must also pay a non-refundable \$300 registration fee with your application (this applies to both private pay and those using waivers) to secure your child's placement in the summer camp. Later in April, you will receive an invoice for the remaining balance due. You can choose to pay in full or make installments, but the entire balance will be due before the first day of camp. Don't forget that camp deposits and tuitions can be paid with your credit card online at www.conductiveed.com. Places are limited, so please sign up ASAP. If a camp session is cancelled by CFCE for any reason, your application fee will be refunded. This is the only circumstance for which your application fee will be refunded.

If you have any questions please contact our team at admin@conductiveed.com or call (720)252-2299. Please forward this form to any other children and families who you think would benefit from Conductive Education. We look forward to hearing from you.

Sincerely,

Jennifer Doyle CFCE Executive Director Jalyss Zapfletts Program Director Phone: (720)252-2299 Email: <u>admin@conductiveed.com</u>

2022 – CFCE Summer Camp Registration Form

Please fill in and return to CFCE by mail to: CFCE, PO Box 746297, Arvada, CO 80006, or scan and email forms to <u>admin@conductiveed.com</u>

Parent/Guardian's Name	
Child's Name and Age	
Address	
Phone Number	Email Address (required)

I would like to sign my child up for the camp(s) selected below and have included (or paid online) the required non-refundable \$300 application fee to secure my place by April 15th, 2022.

_____I have attended CFCE before.

_____ This is my first time attending a CFCE camp, please send me a registration packet. (An assessment of your child will be necessary before registration is finalized.)

REQUIRED: PLEASE MARK YOUR CHILD'S CURRENT MOBILITY LEVEL TO ENSURE CORRECT GROUP PLACEMENT

Low Mobility: Primary mobility aid is a wheelchair. Child is working on floor mobility such as rolling and sitting up and may use a gait trainer for walking.

_____ Mid Mobility: Mobility aid is a walker or manual wheelchair. Child can stand while holding onto something, take steps in a walker, and sit independently.

High Mobility: Primary mobility aid is a simple walker, canes, or can walk independently. Working on free-walking or cane-walking. Can move around a room safely and independently.

*Life Skills Group: Child has minimal gross motor difficulties but struggles with motor planning. Working on functional skills such as dressing, task follow through, and social skills. Designed for those with a diagnosis of ASD, Down Syndrome, genetic conditions, etc. *ONLY AVAILABLE IN LOVELAND JUNE 27th – JULY 8th

PLEASE READ: The group is an important part of the method of Conductive Education. Therefore, if your child is the only one in their ability level signed up for a certain week we may ask that you move to a different week.

Additional comments:

CONTINUED ON NEXT PAGE

PLEASE MARK PREFERRED WEEKS with "P" and available weeks with "A"

Marking both your preferred and available weeks allows us to create the best group possible. Include the TOTAL number of weeks you are registering for

	*May 31	June 6	June 13	June 20	June 27	*July 5	July 11	July 18	July 25	**Aug 1	Aug 8	<mark># of</mark> wks
Arvada					N/A	N/A						
Loveland 9 - 2	N/A	N/A	N/A	N/A					N/A	N/A	N/A	

Please check: 9-2pm _____ or 9-12pm (under 7 years old only) ______

*Class will not be held on May 30th (Memorial Day) or July 4th (Independence Day) **Some groups will not have class on August 4th (CFCE Golf Tournament) You will receive \$100 class credit if you sign up for a week that has one of these dates listed above (private pay only).

PRIVATE PAY TUITION RATES

	9 - 2pm	9 – 12pm
2 Weeks	\$1,825	\$1,095
3 Weeks	\$2,738	\$1,643
4 Weeks	\$3,150 (save \$500 from base price)	\$1,890 (save \$300)
5 Weeks	\$3,938 (save \$625)	*For children under 7 who may
6 Weeks	\$4,428 (save \$1,050)	not be able to participate in a full 5-hour session, we offer 3-hour
7 Weeks	\$5,166 (save \$1,225)	sessions on certain weeks, based on interest. If you are interested,
8 Weeks	\$5,904 (save \$1,400)	please mark your preferred dates above and initial here:
9 Weeks	\$6642 (save \$1,575)	

No credits for missed days or if your child is sick.

Weeks are not required to be consecutive to receive discount

EARLY BIRD: If tuition is paid in full by May 1st a discount of \$100 will be applied! Private pay only Please select your method of payment for camp, either private pay or Medicaid waiver.

I/We will be paying private rates for camp this year and we have read and understood the information above. I agree to pay the \$300 registration fee which will be used towards the final cost of camp.

Signed: Date:

I/We will be using a Medicaid waiver listed below and will provide all information required below along with a non-refundable registration fee of \$300. I understand that if CFCE is unable to bill my waiver that I will be required to pay the private pay rate.

Signed: _____ Date: _____

WAIVERS AND MEDICAID

CFCE is able to bill through the following waivers: SLS, DD, and CES. In order to bill, CFCE must be in contact with your case manager **before** the start of your child's session. If you would like to use a waiver to cover the cost of camp, you must provide the following information:

Case Manager Name:

Case Manager Email: _____

Case Manager Phone: _____

CCB Name:

|--|

Please sign and return pages 2-4

Signed (Parent/Guardian) Date

Thank you for your registration. We will send a confirmation email soon. We look forward to seeing you this summer!