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**What are Sibshops?**

Sibshops provide the opportunity to meet other siblings who have brothers and sisters with special medical or developmental needs. Siblings are encouraged to share the challenges and share the positive side of having brothers and sisters living with a disability. Sibshops are lively, action packed workshops that celebrate the many contributions made by brothers and sisters of kids with special needs. Sibshops acknowledge that being the brother and sister of a person with special needs is for some a good thing, for others a not-so-good thing, and for many, something in between. They reflect a belief that brothers and sisters have much to offer one another - if they are given a chance to do so. The Sibshop model mixes information and discussion activities with new games (designed to be unique, off-beat, and appealing to a wide ability range). There are currently more than 200 Sibshops across the United States and around the world.





**Registration Form**

Children’s Sibshops for Brothers and Sisters

Ages 6 - 10

The Hill Community Center

2121 Bay Hill Drive

Plano, TX 75023

4:00pm-5:30pm

Please check the dates that you would like

for your child to attend.

September 2, 2017

October 7, 2017

November 4, 2017

December 2, 2017

January 6, 2018

February 3, 2018

March 3, 2018

April 7, 2018

May 5, 2018

* **Cost per Sibshop is $5 (includes a snack)**
* **I would like to request scholarship assistance. \_\_Yes \_\_No Amount requested $\_\_\_\_\_**
* **I would like to make a donation to help sponsor a Sibshop participant. \_\_Yes \_\_No**





Date:\_\_\_\_\_\_\_\_\_\_

Child’s Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Child’s Age:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent’s Names:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Home Telephone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

What are your reasons for enrolling your child in the Sibshop Program?

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Do you have any concerns about enrolling your child in the Sibshop Program?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you have any particular topics that you would like addressed at the Sibshop?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does your child have any food allergies or dietary restrictions?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_





Please provide any other information that you feel will make this an enjoyable and educational experience for your child.

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I assume all risks and hazards of the Sibshop program. In case of injury, I do hereby waive all claims or legal actions, financial, or otherwise against The National Autism Association of North Texas, their Board Members, the organizers, sponsors, supervisors or any volunteer connected with the Sibshop program. In the absence of a signature, payment of fees, and participation in the program shall constitute acceptance of the conditions set forth in the release. I grant full permission to use any photographs, videotapes, motion pictures, recordings, or any record of this Sibshop program for promotional purposes.

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

Signature of Parent or Guardian Date

**Please make checks or Money orders payable to the National Autism Association of North Texas.**

**To register contact Rose Henke:** [**rosehenke@yahoo.com**](mailto:rosehenke@yahoo.com)

**(214)930-4934 or (972)633-8688**

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**Save the Dates!**

**What:** Children’s Sibshops for Brothers and Sisters Ages 6 - 10

**Where:** The Hill Community Center

2121 Bay Hill Drive

Plano, TX 75023

4:00pm-5:30pm

**When:** Please check the dates that your child will attend.

September 2, 2017

October 7, 2017

November 4, 2017

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January 6, 2018

February 3, 2018

March 3, 2018

April 7, 2018

May 5, 2018

**Regrets:** Call or email Rose Henke to cancel so we can enroll kids on the waitlist. [rosehenke@yahoo.com](mailto:rosehenke@yahoo.com) (214)930-4934 or (972)633-8688

**Parking:** There is parking in front of the building. *Please arrive at 3:50pm and pick your children up promptly at 5:30pm.* Thank you!!