

Monarch Sibshops (Sibling Support Groups) – West Side

Interactive workshops conducted in a relaxed recreational setting on the West Side, designed to introduce siblings of children with autism to their peers, and facilitate conversations regarding common joys and concerns.

Group #1 (ages 6-11)

Dates:

Tuesdays:

- October 9
- October 16
- November 13
- December 11

Group #2 (ages 12-19)

Dates:

Tuesdays:

- October 23
- October 30
- November 20

Monday:

- December 10



Time:

6:30 – 7:30pm

Location:

University Hospital Westlake Medical Center
960 Clague Road
Westlake, Ohio 44145

Price:

\$100 (for 4 sessions)

Facilitators:

Becky Remner, M.S. CCC-SLP (Monarch Speech/Language Pathologist)
- and -
Amy Mercer, M.Ed. (Monarch Associate Teacher)

Registration:

Please visit <http://www.monarchcenterforautism.org/upcoming-events/table>, download and complete the attached registration form, and return it with payment to Karin Hess-Hopkins at Monarch School by October 4 for Group #1 or by October 18 for Group #2.

For more information, please contact Karin Hess-Hopkins at 216.320.8658 or hessk@bellefairejcb.org. Minimum enrollment is required.



Registration Form—Monarch Sibshops West Side

Name(s) of Participant(s): _____

Date of Birth: _____

Current Age: _____

Current School Grade: _____

Current School: _____

School District: _____

Parents' Names: _____

Primary Address: _____

Street Address

City, State and ZIP Code

Home Phone Number: _____

Email Address: _____

Mom's Cell: _____ Dad's Cell: _____

Please Select One: _____ Group #1 (ages 6-11) OR _____ Group #2 (ages 12-19)

Payment (Credit Card or Check) – Monarch Sibshops West Side

Payment of \$100 (for 4 sessions) may be submitted by credit card (see below) or by check made payable to Monarch School.

By filling out the information below, I authorize Monarch School to charge the account listed below:

Type of Card: _____ MC _____ Visa

Name as it appears on the card: _____

Card Number: _____

Expiration Date: _____

Signature: _____

Today's Date: _____

Please complete this registration form by 10/4 for Group #1 (ages 6-11) or by 10/18 for Group #2 (ages 12-19)
and email it to: hessk@bellefairejcb.org
or mail it to: Karin Hess-Hopkins, Monarch School, 22001 Fairmount Boulevard, Shaker Heights, Ohio 44118
For more information, please call Karin at 216.320.8658.

Note: Enrollment will be confirmed via telephone in approximately one week. Minimum enrollment is required.