

## Group Services Winter 2021 Respite Application

Group Services is so excited to be able to continue to offer our funded evening and weekend programs! While spaces are limited, we are offering select evening and weekend groups for children and youth as well as weekend groups for our adult participants. All services In-Centre will be offered at a 1:1 ratio and will be compliant with COVID-19 recommendations as directed by Toronto Public Health.

Since Children's Weekend spots are limited, we are continuing with an application process and depending on the number of applications, will use a lottery system to determine respite spots.

*Please note that these are funded programs and therefore you may only apply to **ONE** session. In addition, these programs are non-refundable unless COVID-19 guidelines change and programs are closed.*

### Winter 2021 In Centre Evening & Weekend Respite

Evening and Weekend Respite are recreational programs that support children and youth Autism Spectrum. Participants will have exposure to social, recreational and leisure opportunities in a group environment. Respite staff use the principles of Applied Behaviour Analysis (ABA) to support clients in working towards individualized goals and engage in individual and group activities.

**To register for Children's Evening Respite, please click [here](#).**

**To register for Children Weekend Respite, please complete the application below and return to [groupservices@autism.net](mailto:groupservices@autism.net) by December 22<sup>nd</sup> 2020.**

### Winter 2021 Remote Social Club

Social Club gives children and youth a platform to connect with similar-aged peers on an ongoing basis using Zoom for Healthcare. Lightly facilitated by a Geneva Centre group services staff, the Social Club will be a limited structure meeting where participants can login to connect with peers, play some games, discuss shared interests, and see some new and familiar faces. Caregiver participation is not required, just login and allow your child the opportunity to socialize the session away while you take time for yourself!

**To register for Remote Social Club, please click [here](#).**

For more information, reading remote or in person services, please reach us at [GroupServices@autism.net](mailto:GroupServices@autism.net) or by phone at 416-322-7877 ext.259.

We can't wait to see you!

## COVID-19: IN-PERSON SCREENING AND REGISTRATION

<b>COVID-19 Screening</b>		
1. Has the participant travelled in the past two weeks or been in contact with someone who has travelled in the past two weeks?	Yes	No
2. Has the participant been in contact with someone who has tested positive for COVID-19?	Yes	No
3. Will the participant tolerate <b>support staff</b> wearing Personal Protective Equipment (e.g. masks, face shields)?	Yes	No
4. Will the participant tolerate washing their hands and using hand sanitizer?	Yes	No

<b>Behaviour Screening</b>		
1. Does the participant engage in elopement behaviour (i.e. do they run away or wander around) rather than stay in a designated area such as a classroom?	Yes	No
2. Does the participant engage in any at-risk behaviours? If Yes, please specify all at-risk behaviours.	Yes	No
3. In camps or recreational programs, my child typically requires 1:1 or 1:3 support?	1:1	1:3

<b>Participant Information</b>			
First Name:		Last Name:	
Date of Birth:		Male	Female      Undisclosed

<b>Medical Information</b>	
Are there any concerns (physical/social) that you would like us to be aware of? Yes      No If yes, please specify.	
Does the participant have any allergies that you would like us to be aware of? Yes      No If yes, please specify.	
Does the participant carry an EpiPen? Yes      No	
Does the participant need to take any medication? Yes      No      If yes, please specify.	
Permission to be administered during program? Yes      No Time/Dose:	

<b>Primary Contact Information</b>		
First Name:	Last Name:	
Address:	Unit/Apt:	
City:	Province:	Postal Code:
Email:	Phone:	

<b>Emergency Contact Information</b> (other than previously listed)		
First Name:	Last Name:	
Relationship:	Phone:	
Permission to pick up child? Yes      No		
First Name:	Last Name:	
Relationship:	Phone:	
Permission to pick up child? Yes      No		

<b>Drop-Off and Pick-Up Information</b>
<p>Please note that drop-off and pick-up must be done by the caregiver or persons listed above. The caregiver or individual dropping the participant off must be available to return the participant home if they do not pass the screening/temperature check. If your child is taking transportation, the caregiver must still be available to pick up if the participant does not pass the screening/temperature check.</p> <p>Is your child taking transportation to Geneva Centre for Autism      Yes      No</p>