



Down Syndrome Achievement Centers  
gigisplayhouse.org/Chicago

## Life Skills 101 Registration Form – WINTER 2014

Wednesday from 4-5pm  
February 5 through March 12

PROGRAM CRITERIA & GOALS		
Your child might be appropriate for this group if: <ul style="list-style-type: none"><li>• He/she is able to put on and take off clothing but needs help with fasteners such as button, zippers, and shoe laces.</li></ul>		Program Goal: <ul style="list-style-type: none"><li>• Developing techniques to tie shoe laces and other fasteners.</li></ul>
REGISTRATION INFORMATION		
Parent's Full Name:		
Participant's Full Name:		
Participant's Date of Birth:		
Current address:		
City:	State:	ZIP Code:
Email:		
Home Phone:		
Cell Phone:		

At GiGi's Playhouse, we want every child to be successful in any program he or she participates in and we need your help to accomplish that. Parents not only have huge impact on their own child's success, but on the success of other children and the Playhouse as a whole.

All programs are FREE and staffed by volunteers who spend countless hours preparing for classes, designing the curriculum and finding ways to help your child to be successful. If a volunteer has a bad experience or senses that parents don't value their work, we run the risk of them not returning, jeopardizing both current and future programs.

Here's how you can help:

- Please be consistently on time. Arriving 5 minutes early is even better!
- Notify your class leader or tutor in advance if you cannot make a session
- Thank the volunteers for all their time and efforts, then thank them again
- Remember that we're all in this together and want each other to be successful
- Volunteer your time! All families who are registered for a program at the playhouse will receive a link to [Sign-Up Genius](#) (our on-line volunteer sign-up). We ask that each family sign-up to volunteer at least once per program session.

### Together with the efforts of GiGi's volunteers, I (we) are committed to our child's success!

PARENT SIGNATURE	
By signing this agreement, I also understand my child may be photographed while participating in GiGi's Playhouse programs and that those photographs may be used for publicity and fundraising purposes.	
Signature of Parent:	Date:

**Please return completed registration for via email OR mail/drop off form at GiGi's Playhouse, 3948 N. Lincoln Ave, Chicago, IL 60613. Questions? Email: [chicago@gigisplayhouse.org](mailto:chicago@gigisplayhouse.org)**