

2025 - CFCE Summer Camp Information

We are excited to release our 2025 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 private pay 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 place. If you would like further information about Conductive Education and what the camp will entail, please do not hesitate to contact us at <u>admin@conductiveed.com</u> or 970-667-0348 (voicemail only) and someone will call you back.

We need to know well in advance who is seriously interested in signing up for camp this summer so that we can arrange to hire Conductors and staff members for each camp. Please understand that hiring and training staff needs to happen months in advance, so the earlier you can register, the more helpful it is to us for planning.

If you would like to sign up for camp, please fill in the registration form and return to CFCE by emailing <u>admin@conductiveed.com</u> by **April 1st, 2025**. Forms can also be sent by mail to: CFCE, PO Box 746297, Arvada, CO 80006. Places are limited, so please sign up ASAP.

We are unable to require a registration fee or deposit, but we hope you understand how important it is that you turn up for all the weeks you register for at camp because we staff all our groups 1:1 and cannot afford to pay staff if we are unable to bill the time. Please be considerate of this when you sign up and be prepared to commit to what you register for.

We are a non-profit and rely heavily on donations and grants to cover all our equipment costs and staffing needs. If you would like to consider a donation to CFCE when you register to help us better serve our participants, we would be very grateful for this. Our suggested donation is \$300 per camper, but any donation would help our program thrive!

If you have any questions, please contact our team at <u>admin@conductiveed.com</u> or call 970-667-0348. Please forward this form to any other families who you think would benefit from Conductive Education. We look forward to hearing from you.

CFCE Admin Team Phone: 970-667-0348 Email: admin@conductiveed.com

2025 – CFCE Summer Camp Registration Form

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

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

Required: please mark the student's mobility level to ensure correct group placement*

Low Mobility: Primary mobility aid is a wheelchair and/or supportive gait trainer. Working on floor mobility such as rolling and sitting up, short periods of weight bearing, and initiating stepping. Requires support for sitting.

Mid Mobility: Primary mobility aid is a wheelchair, walker, or canes. Can sit/stand independently or while holding onto something and take steps with or without a walker

📃 🛛 High Mobility: Independe	ently mobile without a	aids such as a walker	or canes. Can sit
without physical support. May u	se mobility devices in	the community, but	primary mode of
mobility is walking.			

Life Skills Group: Walks independently but struggles with motor planning, complex movements (e.g. jumping, skipping), or coordination. 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.

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

*If you are unsure about which group(s) is the best fit for your student, please feel free to contact us at <u>admin@conductiveed.com</u> or 970-667-0348 to discuss.

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. Weeks in grey are not available. You must also include the **total number of weeks** you want to attend. There is a 2 week minimum for camp and a 6 week maximum to allow as many children the opportunity to attend as possible.

Week		1	2	3	4	5	6	7	8	9	10	11
ARVADA	Days/times	5/27 - 30 *	6/2-6/6	6/9-6/13	6/16-6/20	6/23-6/27	6/30-7/3	7/7-7/11	7/14-7/18	7/21-7/25	7/28-8/1	8/4-8/8
Low Mobility	5 days M-F 9.30-3pm	*					*					
Mid Mobility	5 days M-F 9.30-3pm						*					
High Mobility	5 days M-F 9.30-3pm	*							*			
Life Skills	5 days M-F 9.30-3pm											
Adult	3 days M/W/F 10-3pm											
Week		1	2	3	4	5	6	7	8	9	10	11
LOVELAND	Days/times	5/27 - 30 *	6/2-6/6	6/9-6/13	6/16-6/20	6/23-6/27	6/30-7/3	7/7-7/11	7/14-7/18	7/21-7/25	7/28-8/1	8/4-8/8
Low Mobility	5 days M-F 9.30-3pm											
Mid Mobility	5 days M-F 9.30-3pm											
High/Life Skills	5 days M-F 9.30-3pm											

REQUIRED: How many TOTAL weeks would you like to attend? _____ **Please check:**

9:30 AM - 3:00PM or

*Class will not be held on May 27th (Memorial Day) or July 4th (Independence Day) You will receive \$100 class credit if you sign up for a week that has one of these dates listed above (private pay only).

9:30 AM - 12:30 PM (under 7 years old only)

****Please note the adult/teen class starts at 10am.** Adult participants may choose to register for the adult-only camp AND/OR the mixed-age groups throughout the summer.

	9:30 - 3:00	9:30 – 12:30 (Children under 7 only)	10 -3pm (adult/teen group only)
2 Weeks	\$2145	\$1,170	\$1,950
3 Weeks	\$3218	\$1,755	\$2,925
4 Weeks	\$3,740 (save \$550 from base price)	\$2040 (save \$300)	\$3,400 (save \$500)
5 Weeks	\$4,675 (save \$689)		
6 Weeks	\$5610 (save \$1,155)		

PRIVATE PAY TUITION RATES

*For children under 7 who may not be able to participate in a full 5.5 hour session, we offer 3-hour sessions on certain weeks, based on interest. **If you are interested, please mark your preferred dates above and initial here:**

There are NO credits for missed days or if the student is sick.

Weeks are not required to be consecutive to receive discount

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.

Signed: ______ Date: ______

I/We will be using a Medicaid waiver listed below and will provide all information required below. I understand that if CFCE is unable to bill my waiver that I will be required to pay the private pay rate.

Date	Signed:	Date	:
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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 the student'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:	
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Waiver: (SLS, DD, CES)	
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Please sign and return pages 2 – 5

C'	Data	
Signed:	Date:	
Signear	Date.	

Thank you for registering. You will receive an email confirming your camp dates by April 15th.

We look forward to seeing you this summer!