

# WINTER/SPRING 2010 CHILD/YOUTH READING & WRITING PROGRAMS

Specialized Programs for Children and  
Youth with Invisible Disabilities



- One-to-one tutoring/small group activities (if appropriate) address the child's specific learning challenges in reading and writing.
- Tutors are selected and trained to provide a safe, non-threatening environment for children to learn, and have access to professional consultation services in related disciplines (i.e. speech and language).

**DATES, TIMES AND LOCATIONS:** Please see the registration form on the reverse side of this form or visit our website: [www.ldasvi.bc.ca](http://www.ldasvi.bc.ca)

**REGISTRATIONS ARE ACCEPTED AT ANY TIME**

**COST:** \$30/session. Flexible payment plans available. Financial assistance may be available.

**INFORMATION:** Please contact the Learning Disabilities Association

Learning Disabilities Association of BC  
South Vancouver Island Chapter  
1524 Fort Street Victoria BC V8S 5J2  
Phone: (250) 370-9513 Fax: (250) 370-9421 Website: [www.ldasvi.bc.ca](http://www.ldasvi.bc.ca)

*"The LDA-SVI gratefully acknowledges the financial assistance of the Province of British Columbia"*



**Idabc** · Learning Disabilities  
Association of British Columbia  

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**South Vancouver Island Chapter**

**Registration Form (WINTER/SPRING 2010)  
Reading and Writing Programs**

**Section I: Please complete the following by printing clearly.**

Youth's Name: _____		Date of Birth: <u>  </u> / <u>  </u> / <u>  </u> Y	Age: <u>  </u>	Gender <u>  </u>
Address: _____		City: _____		
Province: _____	Postal Code: _____	Phone: _____		
Parent's Name(s):	(1) _____	(2) _____		
Parent's Daytime Phone:	(1) _____	(2) _____		

**Section II: Applicant Profile. Please check all that apply.**

The applicant has: LD <input type="checkbox"/> AD/HD <input type="checkbox"/> Suspected LD <input type="checkbox"/> Other _____
Has your child had an assessment for learning or attention difficulties? yes <input type="checkbox"/> no <input type="checkbox"/>

**Section III: Registration Details.**

January 11<sup>th</sup> – June 19<sup>th</sup>  
One –Three Sessions per week  
(No classes on Stat Holidays)

AGE RANGE	DATES Circle preferred DAY(S) and TIME(S)	TIME	Select Section (X)
6 -18	<b>Mondays Wednesdays and/or Thursdays</b>  <b>1:30 / 2:00 / 2:30 / 3:00 / 3:30 / 4:00 /4:30 / 5:00 / 5:30 / 6:00 / 6:30 / 7:00 / 7:30</b>  <b>Saturdays</b> <b>9/ 10/11/ 12/1</b>	50 min. sessions available between 1:30 p.m. and 7:30 p.m.  50 min. sessions available between 9 a.m. and 1 p.m.	

**Section IV: Financial Assistance.**

Do you require financial assistance? Yes  No

**PLEASE SEND REGISTRATION FORM (via mail or fax) TO:  
Learning Disabilities Association 1524 Fort Street Victoria BC V8S 5J2  
PHONE: 250-370-9513 FAX: 250-370-9421**

**Upon receipt of your registration, you will be contacted regarding your child's program.**

For office use only

Date Received	Parent Contacted	Interview	Intake Complete	Payment Details

