



**CAROUSEL**  
DANCE CENTRE INC.

# Dance for EveryBODY

## PARTICIPANT PROFILE

Every child is unique! To help us plan the dance program, please complete the following participant profile. If you would like to discuss child's involvement in the program, please do not hesitate to contact The Carousel Dance Centre at 519-746-8877.

Child's Name: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_

Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Medical Diagnosis Primary: \_\_\_\_\_

Secondary: \_\_\_\_\_

How does the medical diagnosis affect your child?

Physically: \_\_\_\_\_

Cognitively: \_\_\_\_\_

Socially: \_\_\_\_\_

Medical Precautions (seizures, respiratory, medications. . .) \_\_\_\_\_

\_\_\_\_\_

Please identify any triggers that may initiate any negative behaviours: \_\_\_\_\_

\_\_\_\_\_

Please identify any strategies/techniques useful in managing your child's behaviour: \_\_\_\_\_

\_\_\_\_\_

What are your child's strengths? \_\_\_\_\_

\_\_\_\_\_

Please rate your child's gross motor skills: (1 = poor, 5 = good)

Balance 1 2 3 4 5 Coordination 1 2 3 4 5 Learning New Skills 1 2 3 4 5

My child can follow  one-step  two-step  multi-step instructions

Do you have any tips to help us teach your child physical skills? \_\_\_\_\_

\_\_\_\_\_

Do you use specific motivators or rewards with your child? \_\_\_\_\_

\_\_\_\_\_

Please rate your child's communication skills: (1 = difficult, 5 = easy)

To get the attention of others 1 2 3 4 5 To ask for help 1 2 3 4 5

To communicate basic needs 1 2 3 4 5

My child communicates with

words  sentences  gestures/hand leading  signs  other \_\_\_\_\_

Does your child benefit from visuals?  photos  n/a

If yes, are they used for  schedules  rules  instructions

How will your child let us know if they:

Are frustrated? \_\_\_\_\_

Need to use the washroom? \_\_\_\_\_

Need to get the attention of others? \_\_\_\_\_

Want to ask for help? \_\_\_\_\_

Do you have any tips to help us communicate effectively with your child? \_\_\_\_\_

\_\_\_\_\_

Does your child find transitions  easy  sometimes challenging  challenging

Do you use specific strategies to help your child transition? \_\_\_\_\_

\_\_\_\_\_

Does your child have any sensory sensitivity that we should be aware of? (clothing, noise, crowds, etc.)

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Please tell us a few of your child's favourite things (songs, movies, etc.): \_\_\_\_\_

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Please rate your child's activity level, impulsiveness, and attention span

Activity level    low    average    high

Impulsiveness    low    average    high

Attention span    low    average    high

Is your child aware of danger? (e.g. speed, wandering, etc.) \_\_\_\_\_

Is there anything else we should know about your child? \_\_\_\_\_

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***Thank you for taking the time to fill out this form. Please return it to***

***The Carousel Dance Centre***

***550-D7 Parkside Drive, Waterloo***

***admin@carouseldancecentre.ca***