

2025 ABC BOOT CAMP



FTH CAMP PHILOSOPHY

The therapists at FTH feel this therapeutic camp environment is an important step in your child's transition to the successful inclusion into regular day camp and school programs.

Our hope is to provide a fun and motivating camp experience in a safe, supportive environment in order for your child to try out new skills.

From the Heart Therapy Services
4613 Bee Caves Road Ste # 202
Austin, TX 78746



2025 ABC BOOT CAMP
\$225 PER WEEK
 Tuesday / Wednesday / Thursday
 12:30 pm - 3 pm

LEVEL 1

A multi-sensory approach to learning the alphabet and its sounds using Handwriting Without Tears and other activities to teach the correct formation of the upper case letters , the numbers 0-9 and your child's first and last name.

LEVEL 11

A multi-sensory approach to learning the alphabet and its sounds using Handwriting Without Tears and other activities to teach the correct formation of the lower case letters , the numbers 1-20. Emphasis will be on alignment, size, and spacing, as well as transitioning from letters to words and sentences. Activities to improve in hand manipulation skills and tool grasp will also be provided.

- ♥ It is recommended to complete at least 3 weeks of the camp.
- ♥ Therapy visit (s) will occur during this time frame and will be charged as they usually are and separated from the camp fee.
- ♥ A pretest will be given to each child to evaluate skills and an individual program will be setup.
- ♥ A home program will be given at the end of the camp period to practice the skills learned.

CAMP PAYMENTS ARE NON-REFUNDABLE

FTH ABC Boot Camp
Registration - 2025

CHILD'S NAME: _____
 DOB: _____ AGE: _____
 ADDRESS: _____
 CITY: _____ STATE: _____ ZIP: _____
 PARENT'S NAME: _____
 PHONE: _____ CELL: _____
 EMAIL: _____
 SPECIAL PRECAUTIONS; _____

 ALLERGIES: _____
 SPECIAL DIETS: _____

Please check which weeks your child will be attending:
\$225 per week

- June 24th – June 26th \$ _____
- July 8th – July 10th \$ _____
- July 15th – July 17th \$ _____
- July 22nd – July 24th \$ _____
- July 29th – August 31st \$ _____

TOTAL \$ _____

Parent's Signature: _____

Payment method: Visa MC AMEX Discover

USE CARD ON FILE

Card number: _____ Exp Date: _____

Name on card: _____ CVV #: _____

Check number: _____