



- **Speech-Language Therapy**
 - **Diagnostic Evaluations**
 - **Executive Function Coaching**
- **Dyslexia Therapy**
 - **Social Communication Groups**
 - **Learning Skills/Strategy Instruction**
- Reading • Vocabulary • Inferencing • Summarizing/Paraphrasing • Written Language

"Committed to the Development of the Whole Child."

SLLS MERIDIAN ACADEMY REGISTRATION FORM

Student Name: _____ Grade: _____

Parent/Guardian Name: _____ Cell Phone: _____

Parent/Guardian Email: _____

Parent/ Guardian Name: _____ Cell Phone: _____

Parent/ Guardian Email: _____

Address: _____ Home Phone: _____

Strategy Choice(s)

Check Box(es)	Language Comprehension and Written Language Strategies Offered
<input type="checkbox"/>	Vocabulary (ACT/SAT) Building
<input type="checkbox"/>	Paraphrasing and Summarizing Strategy
<input type="checkbox"/>	Inference Strategy
<input type="checkbox"/>	Written Language / Executive Functioning Strategies
<input type="checkbox"/>	

Group Programming chosen, if available, June 1-12, 2026 (check box) **OR**

Individual Programming chosen (check box) - frequency and intensity will be based on vacation, camp schedules, and school end/start dates. A minimum of ten, 1-hour sessions are targeted for each strategy introduced. **Please note availability below.**

Mondays Tuesdays Wednesdays Thursdays Fridays

AM Preference (8am-11am) Mid-Day Preference (11am-2pm) PM Preference (2pm-5pm)

Last Day of School in May/June: _____ First Day of School in August: _____

Summer Camp & Vacation Schedule <small>(Please note dates unavailable)</small>	
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Strategy recommendations consider information collected via the parent intake process. This may include discussion of concerns/priorities, current school performance, and review of prior assessment reports. Please include all previous educational, cognitive, or speech-language evaluation reports with this registration. Necessary forms will be mailed for parent completion and return to SLLS. Select Meridian Academy services may require additional background information, a potential speech-language screening and/or evaluation, or a consultation. If ongoing services are requested following completion of Meridian Academy sessions, a speech-language screening or further evaluation may be required.

Payment Policy: Services are billed at our onsite hourly therapeutic rate of \$125 per hour for individual programming. Ask about potential group options for cost savings. Group rates are billed at \$70 to \$90 per hour, based on actual number of group participants in attendance and location. A 24-hour notice is required to avoid billing for missed sessions and optimal for rescheduling. Billing for no notice/late notice cancellation is policy.

Parent/Guardian Signature

Parent/Guardian Signature

Date

SERVING ST. LOUIS FAMILIES FOR OVER 27 YEARS