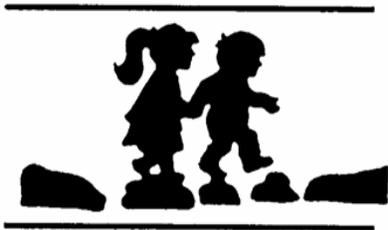


Stepping Stones



Learning Center

PRESENTS:

Analysis and Treatment of Challenging Eating and Mealtime Behaviors for Children on the Autism Spectrum



March 31st, 2012
Colgate Divinity School
Rochester, NY

CONTENT

Does your student/child have an extremely self-limiting diet? Will s/he only eat food of a certain texture or color? Does s/he still drink from a baby bottle or eat baby food despite being past the age where this is expected? Are mealtimes difficult because your student/child refuses to remain seated, or insists on using a specific bowl, cup, or utensil? Is eating a meal in a restaurant a challenge because of unwanted behavior or difficulty waiting for the food to arrive? Perhaps there are other behaviors that make eating and mealtimes a challenge?

With a combined 45 years of experience in the field of developmental disabilities, presenters will offer detailed treatment plans and intervention guidance for the above challenges. Treatment includes behavioral, developmental, and practical strategies for families, caregivers, therapists and teachers.

Who Should Attend?

Parents
Caregivers
Teachers

Speech Therapists, Occupational Therapists,
Behavioral Therapists

Anyone who has a child with challenging eating and mealtime behaviors!

Objectives

Participants will be able to:

Identify common causes of eating and mealtime challenges

Identify a starting point for treatment

Use targeted intervention techniques and strategies to craft an appropriate intervention plan

Stepping Stones Learning Center Mission Statement

Stepping Stones Learning Center is committed to serving children, their families, and the community, through collaborative ventures for the provision of quality programs and services to achieve the highest level of success for all participants.

Conference Location, Time, Cost and Meals

March 31, 2012 8:00—4:00

Colgate Divinity School

1100 South Goodman Street Rochester, NY 14620

\$69.00

* Continental breakfast, a full lunch, and snacks
WILL be provided

Registration:

Name: _____

Address: _____

Phone: _____

Email: _____

I am a: Parent Caregiver Professional

Professional Organization: _____

Job Title/ Discipline: _____

Please fax, email, or mail this completed form with your payment to: Stepping Stones Learning Center
41 Colebrook Drive Rochester NY 14617
ATTN: Mary Richardson

Payment Method

Check: _____

Credit Card: Master Card Visa Discover

Credit Card # _____

3-4 Digit Code on Back of Card _____

Expiration Date on Card _____

Fax #: 585-467-6973

Email: mary@steppingstoneslearning.com

You may also register online at:
www.steppingstoneslearning.com ~ Click on **Conference Information** to complete registration process.

Please register by March 16th to ensure attendance!

For questions please call 585-467-4567 or email Mary at mary@steppingstoneslearning.com.