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Arms in Action Camp Registration Form

Child's Name _____ Sex _____ Age _____
Date of Birth _____ Mother's Name _____ Father's Name _____
Address _____ City _____ State _____ Zip _____
Home # _____ Mother's Cell # _____ Father's Cell # _____
E-Mail _____

Please list any medical issues/medications or allergies that your child has:

Services at Abilities in Action: PT ST OT NONE

Other therapies received outside of AIA: PT ST OT NONE Location: _____

What are your goals for your child?

Any other information we should know?

Dates: August 4-22, 2025

Times: Monday-Friday in the mornings (exact times and office location TBD)

Cost: \$3200

Ratio: 1 licensed OT or PT per 3 children

**Registration deadline is May 15, 2025.*

**A minimum of 4 children is required to run the camp. If we do not receive minimum enrollment, the camp will be canceled and tuition will be reimbursed.*

CAMPER CRITERIA

- Ages: 4-10 years
- Diagnosis of hemiparesis (Other diagnoses maybe considered on an individual basis)
- Must be able to grasp and release an object with the weaker arm
- Ability to interact well with peers
- Must be able to attend and follow directions to participate in group activities without need for one-on-one assistance
- Must be toilet trained
- Must be able to walk or move around independently with an assistive device.
- Must be medically stable

Unfortunately, children are not eligible for our group-based camp if they:

- Have self-injurious behaviors/aggression
- Are easily distracted by others or their surroundings while doing a quiet activity

FINANCIAL RESPONSIBILITY

Upon registration, \$1,000 is due to hold your child's spot in the camp.

Final payment is due May 15, 2025.

If your child is absent from camp, the camp fee is non-refundable.

INSURANCE

If you wish, Abilities in Action will submit claims to your insurance company using Group codes for the dates that your child attends camp, which your insurance may or may not cover. Dates billed to your insurance will be applied to your visit limit, if applicable.

IN NETWORK BILLING

The Abilities in Action is currently an in-network provider with most Blue Cross Blue Shield plans. However, Blue Cross Blue Shield may not cover group therapy. Additionally, not all treatments are considered to be medically necessary and therefore will not be paid by some insurance companies. You will be responsible for payment should treatment be denied for this reason.

If Abilities in Action is reimbursed for the group therapy session by your insurance company, the credit balance will be refunded provided there are no outstanding insurance claims on the family's account and there are no outstanding patient balances on the family's account.

If the patient's insurance benefit is exhausted, either by way of time elapsed or visit count, the patient is responsible for payment in full.

NON-PARTICIPATING INSURANCE PLANS (SELF-PAY)

- Patients covered by insurance plans with which Abilities in Action does not participate
- Patients without an insurance card on file
- Patients who have exhausted their insurance benefit (maximum number of covered visits has been used)
- Patients receiving non-covered treatments: Not all treatments are considered to be medically necessary and therefore will not be paid by some insurance companies. You will be responsible for payment should treatment be denied for this reason.

The patient’s insurance card is required prior to the first visit, and a photocopy of the card will be kept on record.

A completed Medical History Form is required one week prior to camp.

By signing below, I acknowledge that I understand and agree to Abilities in Action policies.

Signature: _____

Date: _____