

Perkins Training Center Assistive Device Center

Creating & Modifying Games

Wednesday, March 21, 2012

See modifications of common games like Uno, Memory, brain teasers and miniature sports games in the Games Exchange Project area of the Assistive Device Center. Participants will have the opportunity to use TriWall® corrugated material, wood, plastic, textured fabrics, Velcro, bump-ons and other materials to begin their own creations. Adapt a commercially available game to enable students with visual, cognitive, or visual impairments to play, or design a unique game to promote

spatial, matching, social and/or motor skills.

Time: 9:00 am to 4:00 pm

Location: Assistive Device Center

Perkins School for the Blind 175 North Beacon Street Watertown, MA 02472

Instructor: Molly Campbell, Coordinator of Assistive Device

Center Occupational Therapist/Assistive

Technology Practitioner

Cost: \$150.00

If you have a specific project in mind please call the Assistive Device Center at (617) 972-7520 or contact Molly.Campbell@Perkins.org to discuss recommended preliminary assessment and measurement needs and to ensure that the necessary materials are available on the day of the class. Registrants must be confirmed to attend this workshop.

Feel free to wear old comfortable clothing for building and painting adaptive equipment. Aprons and paint shirts will be available. Lunch will not be provided.

7 Professional Development Points (PDPs) or Continuing Education Hours are awarded for attendance of the full day session and an additional 3 PDPs/Hrs will be awarded for completing an optional 3 hour follow-up project.

Space is limited. Please submit registration and \$150.00 made payable to Perkins School for the Blind; Perkins Training Center, 175 North Beacon St, Watertown, MA 02472 by Friday, March 9, 2012.

For additional information on upcoming events, please see the Perkins Training Center Schedule online at www.Perkins.org

Email: PerkinsTrainingCenter@Perkins.org Phone: 617-972-7712 Fax: 617-972-7209 Monday-Friday 8:30am-4:00pm

REGISTRATION

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Return by Friday, March 9, 2012

Name:						
Address:						
	Street:	City		State:	Zip:	
Primary Phone: (h)(w)(c)		Sec	Secondary: (h)(w)(c)			
Email:						
Position:						
School:		District/Organization:				
Please indi	cate accommodatio	ns required:				
Braille:	Large Print:	Interpreter:	Other:			
Age of stude	ent(s) & Vision Status	3:				
How did you	u hear about this worl	kshop?				
Please indic	cate all that apply:					
	Professional Develop	oment Points				
☐ 7 Continuing Education Hours						
3 Additional PDPs/Hours Follow Up Project (Optional)						

Send Registration form & \$150.00 fee to:

PERKINS TRAINING CENTER

175 NORTH BEACON STREET Watertown, MA 02472

Seating is limited.

Payment must be received and confirmed in order to secure your participation.

Please Note: Confirmed participant refunds will not be given without a 48 hr notice of cancellation