



You are cordially invited to attend...



# Massage for Kids with Special Needs

Please join Miley Flowers, LMP and Certified Pediatric Massage Therapist for a hands on course where you will learn how to safely and effectively promote well-being in your child through massage. Providing massage to your child can help with a variety of concerns you may have as a parent:

- Difficulty bonding with parent(s)
- Non-verbal communication, improve awareness of body language
- Sleeping difficulties
- Digestion problems; Constipation
- Brain Development through tactile stimulation
- Aversion to touch

Additionally, specific massage techniques can greatly benefit children with the following conditions:

- Autism Spectrum Disorder (ASD)
- Sensory Processing Disorder
- ADD/ADHD
- Cerebral Palsy
- Various Acute and Chronic Medical Conditions

**Class location:**

ARRO Westside Family & Community Center  
2360 SW 170th Ave.  
Beaverton, OR 97006

**Class Date & Time:**

Saturday October 13, 2012  
10:00am - 1:00pm

**Contact Info:**

mileyflowers@gmail.com  
(360) 202-2299

\*The cost of this course is \$45 per family. You are welcome to bring your little one (ages 2 and up) and both parents are encouraged to attend. There will be a portion of the course that is more informative and a kid-friendly movie will be offered for the kids during these times. Please bring your child's favorite blanket or a yoga mat for the hands-on portion of the class. All other materials, including lotion and oil will be provided. If you have any specific concerns, please contact Miley prior to the course and every effort will be made to accommodate your needs. This course is limited to 10 families so register early!

To register for this course please detach this section and return with payment to Miley Flowers, 17649 SW Beaver Ct., Beaverton, OR 97006.

Parent Name(s) \_\_\_\_\_ Phone # \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

**Payment Information:**

- Check or money order payable to Miley Flowers, LMP enclosed.
- Please charge my Visa, Mastercard or AMEX # \_\_\_\_\_ Exp: \_\_\_\_ / \_\_\_\_

I hereby authorize Miley Flowers, LMP to charge payment of \$45.00 to my account.



\_\_\_\_\_  
Account Holder Signature

\_\_\_\_\_  
Date

