



LEXINGTON

Parks & Recreation

Therapeutic Recreation Programs

Therapeutic Recreation (TR) programs provide opportunities for individuals with disabilities and others in the community to enjoy activities through recreation, leisure and play. Our programs are designed to enhance the overall health and wellness of persons with disabilities.

Due to the nature of our Therapeutic Recreation activities and the large number of individuals that participate, we are not able to provide one-on-one supervision. The TR staff will be present to facilitate activities and assist individuals as needed in programs such as art classes, dances and other large group activities. If one-on-one support is needed, then a parent/guardian or other caregiver should be present during the activity.

Parent/Guardians are responsible for participants before and after scheduled program times. Please do not drop off or leave participants unattended before or after the scheduled program time. Program staff will be available during the scheduled program time only. Please do not arrive more than 10 minutes early for programs, as staff are busy preparing for the programs.

Registration

Program registration will be filled on a first-come, first-served basis either by on-line registration or by the postmarked date on the registration envelope if delivered in person. The forms below are set up as a 'fillable PDF' allowing you to type in the information rather than write it in by hand. You may also return your forms by email at the addresses listed below.

Online registration for fall will open on **Friday, August 25 after 10:00am** and will remain open as long as spots are available or classes begin. Please pay close attention to information added to each program listing, as many programs are limited to a specific number of registrations. **Please do not send any registration fees until you have received confirmation you are in the class or program.** Please note that the program fees listed in this guide reflect a state sales tax of 6% which we are required to collect per the Kentucky Department of Revenue as of January 1, 2023.

We will make every attempt to make up missed classes due to inclement weather, however due to scheduling this may not be possible. Refunds or credits are not given for missed classes or programs. If Fayette County Schools are closed due to inclement weather, we will not have programs/classes.

Transportation

Transportation to and from the TR programs/events is the responsibility of the participant. If a parent/guardian or other caregiver is unable to transport a participant to a program, we recommend contacting Wheels at 859-233-3433 to arrange transportation.

For More Information please contact:

Jill Farmer, CTRS
Recreation Manager Senior
Office Number: 859-288-2928
Email: jfarmer2@lexingtonky.gov

Brent Claiborne
Recreation Specialist Senior
Office Number: 859-288-2908
Email: bclaiborne@lexingtonky.gov

Be sure to visit the Parks website at www.lexingtonky.gov/parks for the most up-to date information.

Therapeutic Recreation Programs

Participant Information Form

Please fill out the following information completely. **(PLEASE PRINT)**

Participant's Name (Legal Last) _____ (Legal First) _____ (Preferred) _____

Street Address _____ City _____ State _____ Zip _____

Home Phone _____ Primary Phone Number _____ Email _____

Gender _____ Age _____ Birthdate _____ Ethnicity _____

Diagnosis/Disability: _____

Participant Staffing Ratio (check one) _____ 1:1 _____ 1:2 _____ 1:3 _____ 1:4 _____ Independent

PARENT/GUARDIAN INFORMATION

Parent/Guardian Primary (Legal Last) _____ (Legal First) _____ (Guardian Type) _____

Address (if different than above) _____ City _____ State _____ Zip _____

Primary Contact Method _____ Home _____ Cell _____ Work _____ Email _____

Home Number _____ Cell Number _____ Work Number _____

Parent/Guardian Secondary (Legal Last) _____ (Legal First) _____ (Guardian Type) _____

Address (if different than above) _____ City _____ State _____ Zip _____

Primary Contact Method _____ Home _____ Cell _____ Work _____ Email _____

Home Number _____ Cell Number _____ Work Number _____

EMERGENCY CONTACT INFORMATION:

NAME OF AUTHORIZED INDIVIDUALS FOR PICKUP

PRIMARY PHONE NUMBER(S)

PARTICIPANT INFORMATION

What are the participant's preferred activities? _____

What activities does the participant not prefer? How does participant react? What is the most effective way for staff/caregivers to respond? _____

What are effective transition techniques for the participant (timers, countdowns)? _____

Participant's Name: _____

SENSORY: What kind of sensory experience does the participant **seek or avoid**-sound, touch, visual, taste, smell, movement?

COMMUNICATION:

Is English the participant's primary language? ___Yes ___No If no, please list primary language: _____

How does participant communicate? (verbal, sign language, eye movement, picture boards, tablet, iPad, etc.): _____

Is participant capable of giving staff instruction or should staff rely on parent/guardian comments? (i.e.: food requests, personal care information, etc.) _____

ASSISTIVE DEVICES (check all that apply)___Wheelchair___Braces___Walker___Canes___Glasses___Hearing Aids

___ Augmentative Communication Device___ Other:_____

Wheelchair Type ___Manual ___Power ___Scooter If using a wheelchair, is participant capable of transferring on their own?___Yes ___No

PARTICIPANT TRANSFERS (check all that apply) ___Independent (No assist needed) ___Stand-by of supervision (May have potential for loss of balance) ___Transfer with one person (Minimal assist) ___Participant can bear weight (Transfer with one person) ___Maximum assist (Participant cannot bear weight) ___Transfer with two people needed

Equipment needed for transfer_____

Transfer Equipment needed: _____

Special instructions regarding transfers and how much time participant should be out of the wheelchair? _____

Does Participant wear braces (AFOS, SMOS, etc.?) Describe how/when to put on/take off:_____

Can participant walk independently or do they need assistance? Please describe assistance needed: _____

BEHAVIOR:

___Will wander or leave group___Will ask for assistance when needed ___Has behavior plan (please include with this application) ___Will take others belongings or food ___Easily distracted/difficulty focusing ___Runs away/flight risk

___Recognizes Danger ___Unable to communicate needs ___Anxiety when separated from family ___Has specific triggers (list below) ___Has specific fears/concerns (list below) ___Exhibits self-injurious behaviors (list below)

___Physically/verbally aggressive (explain below) ___Other (list below)

Additional information regarding behavior:_____

SWIMMING EXPERIENCE: ___Has basic swimming skills (can go under, get face wet, float on back, etc.)

___Limited/no swimming skills (not comfortable in water, avoids getting face and head wet, does not go under water).

Additional Swimming Information:_____

Participant's Name: _____

MEDICATION INFORMATION

NAME OF MEDICATION _____

DESCRIPTION _____

DOSAGE _____

TIME GIVEN _____

REFRIGERATION NEEDED _____ YES _____ NO

DISPENSING INSTRUCTIONS _____

SIDE EFFECTS _____

NAME OF MEDICATION _____

DESCRIPTION _____

DOSAGE _____

TIME GIVEN _____

REFRIGERATION NEEDED _____ YES _____ NO

DISPENSING INSTRUCTIONS _____

SIDE EFFECTS _____

NAME OF MEDICATION _____

DESCRIPTION _____

DOSAGE _____

TIME GIVEN _____

REFRIGERATION NEEDED _____ YES _____ NO

DISPENSING INSTRUCTIONS _____

SIDE EFFECTS _____

NAME OF MEDICATION _____

DESCRIPTION _____

DOSAGE _____

TIME GIVEN _____

REFRIGERATION NEEDED _____ YES _____ NO

DISPENSING INSTRUCTIONS _____

SIDE EFFECTS _____

ALLERGIES: (intolerance and reaction-please be specific)

Participant's Name: _____

THIS SECTION MUST BE COMPLETED AND SIGNED FOR PARTICIPATION

MEDICAL CONSENT AGREEMENT AND RELEASE: I hereby authorize the Lexington-Fayette Urban County Government (its agents, employees, representatives, elected or appointed officials or designees and the agents or employees of its Division of Parks and Recreation, collectively referred to as "LFUCG"), to act for me according to their best judgment in an emergency requiring medical attention for me or my son, daughter, or ward and/or to treat me/my child for any injury/illness that I/he/she sustains during participation in any designated Parks and Recreation activity. I authorize admission to any hospital designated by LFUCG, if advance care (x-rays, tests, etc.) is required. It is understood that every reasonable attempt will be made to notify the parent/guardian/named emergency contact of the participant in or to grant any additional authorization for any surgical procedure. Also, I waive and release the LFUCG from any and all liability for any injuries or illnesses incurred while participating in the above activity(s).

I understand that I am responsible for any costs incurred due to injuries received in participating in the above activity(s) covering medical and dental expenses. I further accept responsibility that I and/or my son, daughter or ward, is physically able to participate in the above activity(s).

Signature of Participant or Parent/Guardian (if minor child): _____ Date: _____

WAIVER AND RELEASE AGREEMENT:

(1) I understand and agree that I or my child hereby voluntarily assumes any risk of injury that may arise out of my/his or her participation in the above activity(s) and that the LFUCG assumes no responsibility whatsoever for any injury or damages which may result to me or my child from participation in a Parks and Recreation activity(s).

(2) In consideration of the entry of me/my child into the Parks and Recreation activity(s), I, intending to be legally bound, do hereby for myself, my heirs, executors, and administrators, do hereby waive, release and forever discharge the LFUCG from any and all claims, demands, damages, or injuries or causes of action whatsoever which may arise as a result of or in connection with, association or entry into in and/or arising out of, traveling to or from, and participation in the activity(s), and I hereby agree to hold the LFUCG harmless for any injury or damages or claims to person or property resulting from the above-mentioned participation.

(3) I hereby represent that the above participant is in good physical condition and has no disease or injury that would keep the participant from taking part in the activity(s) and I accept responsibility that I and/or my son, daughter or ward, is physically able to participate in the above activity(s).

(4) I allow the likeness or picture of me/my child to appear in any official documentary, sponsor advertisement or television coverage, whatsoever, of this capacity in any manner incidental to participation in this event/program without compensation to me, my heirs, executors, agents and/or administrators.

(5) I understand that Parks and Recreation will issue a 50% refund only if a refund request form is submitted seven business days prior to the start of the activity, except in special circumstances such as medical reasons.

I hereby assert that I fully understand and agree to these waivers and agreements.

Signature of Participant or Parent/Guardian (if minor child) _____ Date: _____

Please place a check mark by each class or program for which you are registering below. These forms are a 'fillable PDF' allowing you to type in the information rather than write it in by hand. You may also return your forms in person or by email.

Participant's Name: _____

FALL PROGRAMS/ACTIVITIES

BOWLING

Strikes, turkeys and spares are just part of the fun with the TR bowling league. Ramps are available.

Dates: Saturdays, September 2-October 21

Time: 1:00pm-3:00pm

Location: Southland Bowling Lanes, 205 Southland Drive

Ages: 8 years and over

Cost: \$26.50 registration fee, \$8 cash per week paid to Southland Lanes Bowling alley.

ADULT FITNESS

Stay healthy and active through a variety of fitness activities and sports.

Dates: Tuesdays/Thursdays, September 5 – December 14 **No class: Oct. 19, Nov. 21 and Nov. 23**

Time: 1:00pm-3:00pm

Location: Dunbar Community Center, 545 North Upper Street

Ages: 18 & Over

Cost: \$132.50/\$106.00 with scholarship

**Tuesdays, September 12-October 10 - We plan to participate in the Miracle League Baseball Program at Shillito Park. There will be an additional charge of \$10.00 payable to the YMCA.*

INDOOR BOCCE

Come out to learn how to play Bocce using indoor equipment at the Kenwick Community Center. This program will be open to individuals with and without disabilities. This will be a fun and social activity where everyone can play.

Dates: Wednesdays, September 6-October 18

Game Times: 10:00am-11:30am

Location: Kenwick Community Center, 313 Owsley Avenue 40502

Ages: 18 & over

Cost: \$26.50

MIRACLE LEAGUE BASEBALL

Dates: Tuesday's, September 12-October 10

Game Times: 10am, 11am or 12pm

Location: Shillito Park– Miracle League Baseball Field

Ages: 18 & over

Cost: \$10 made payable to the YMCA, if you are a new player, please let Brent know

MUSIC CLASS-TR ROCK BAND *Limited to 15 people*

Here is your chance to be part of a fun music group. Participants will learn to play different electric and acoustic instruments found in popular music from across the decades. We will perform at the end of the fall season in a recital for friends and family. Class led by Music Therapist, Nora Veblen, MM, MT-BC and Team with Wildwood Music Therapy, LLC. All instruments will be provided.

Dates: Thursdays, September 7-December 7 **No class: Oct. 20, Nov. 24**

Times: 11:00am-12:00pm

Location: Artworks at the Carver School, 522 Patterson Street, 2nd Floor

Ages: 18 & Over

Cost: \$53.00/\$42.40 with scholarship

Participant's Name: _____

TR NATURE EXPLORERS PROGRAM

Fun and educational learning experience with staff and volunteers within Lexington Parks Natural Areas. This program will include activities that help individuals learn about and interact with different natural areas. There will be 8 different sessions during this program.

Dates: Fridays, September 8 – October 27

Time: 10:00am -12:00pm

Locations: TBA after registration

Ages: 18 & over

Cost: \$42.40

Music Class-You Can Uke!! *Limited to 20 people*

Learn to play the Ukulele as a group with a recital performance at the end of the program. Join us for a fun music filled Class led by Music Therapist, Nora Veblen, MM, MT-BC and Team with Wildwood Music Therapy, LLC. Ukuleles will be provided.

Dates: Fridays, September 8-December 8 **No class: Oct. 20, Nov. 24**

Times: 3:00pm-4:00pm

Location: Artworks at the Carver School, 522 Patterson Street, 2nd Floor

Ages: 18 & Over

Cost: \$53.00/\$42.40 with scholarship

CHOIR

Join us as we learn to sing some fun songs. This group will learn a collection of songs to be performed at a recital for friends and family at the end of the season. In addition, we will learn a few holiday carols to share with some community groups in December. Class led by Music Therapist, Nora Veblen, MM, MT-BC and Team with Wildwood Music Therapy, LLC. All instruments will be provided.

Dates: Fridays, September 8-December 8 **No class: Oct. 20, Nov. 24**

Times: 4:00pm-5:00pm

Location: Artworks at the Carver School, 522 Patterson Street, 2nd Floor

Ages: 10 & Over

Cost: \$53.00/\$42.40 with scholarship

SOCIAL ARTWORKING

Join us for some creative art classes using handpicked artwork designs. The class will create the same art on canvas. Artwork will be showcased in December at the Fall Program Celebration.

Dates: Saturdays, October 14, November 11 and -December 16

Times: 10:00am-11:30am

Location: Artworks at the Carver School, 522 Patterson Street, 2nd Floor

Ages: 18 & Over

Cost: \$5.00 each session

Participant's Name: _____

THERAPEUTIC HORSEMANSHIP

Staff and volunteers work one-on-one with participants to ensure a safe and fun horseback riding experience. There will be a limit of 4 students per class. **Participants may not weigh more than 220 pounds.** A physician's exam may be required in some cases. Participants are REQUIRED to provide their own ASTM-SEI riding helmets. **No online registration for this class. Please submit paper registration form ASAP.**

Dates: Mondays and Wednesdays, September 11 – October 18

Time: 2pm-3pm and 3pm-4pm

Location: Masterson Station Park Tack Barn, 3415 Shamrock Ln

Ages: 13 & Over

Cost: \$159.00 for six-week session. **No make-up classes will be available.**

Session 01 Monday 2:00-3:00 *NEW Students who have never participated in our program before (if not full we can put returning students in there)*

Session 02 Monday 3:00-4:00 Returning Riders

Session 03 Wednesday 2:00-3:00 Returning Riders

Session 04 Wednesday 3:00-4:00 Returning Riders

LATE POLICY - The program will start at the scheduled time. If you are going to be up to five minutes late for Horsemanship, you must give us a call at 859-509-4748 or 859-310-5216 to let us know. If you are going to be more than five minutes late your session for the day will be cancelled with no refund.

SOCIAL MUSIC GROUP *Limited to 10 people*

In this music therapy group, participants will be led through a variety of music activities designed to practice social-emotional skills in a structured and motivating environment. Participants may be singing, playing instruments, moving to music, playing musical games, and more in order to practice peer to peer interaction and communication, attention and listening skills, awareness of others, coping with differences, teamwork and leadership, and other goals as they may arise. This group will be led by Music Therapist, Nora Veblen, MM, MT-BC and Team with Wildwood Music Therapy, LLC. All instruments will be provided.

Dates: Thursdays, September 21-November 16 **No class: Oct. 20, Nov. 24**

Times: 10:00am-11:00am

Location: Artworks at the Carver School, 522 Patterson Street, 2nd Floor

Ages: 18 & Over

Cost: \$53.00/\$42.40 with scholarship

YOGA

Learn basic yoga skills while increasing flexibility, toning muscles, and improving overall health and wellness. Bring your own bottled water and a towel. Yoga mats will be provided.

Dates: Mondays, September 25 – November 13

Time: 10:30am-11:30am

Location: Artworks at the Carver School, 522 Patterson Street

Ages: 18 & Over

Cost: \$53.00/\$42.40 with scholarship

DRAMA GROUP

Fun and creative class for those looking to show their acting skills. Explore and show case your creative talents with a performance at the end of the season for your friends and family. This class will be led by DJ Rod Givens and will include participants acting out parts from a popular play.

Dates: Wednesdays, October 11-November 15

Time: 6 - 7:30pm

Location: Lexington Senior Center, 195 Life Lane (40502)

Ages: 13 & over

Cost: \$53.00/\$42.40 with scholarship

Participant's Name: _____

ADAPTED AQUATICS *Limited to 12 participants*

Learn basic water safety skills and work on your swim strokes with this class. One-on-one instruction will be provided for most participants. The YMCA requires that participants wear swim diapers/ plastic pants (snug fitting), if the participant does not possess bowel or bladder control. **Note: Each class will be for a total of 30 minutes so it is very important that you arrive at least 15 minutes before your scheduled swim time to change and enter the water on time. No online registration for this class. Please submit paper registration form ASAP.**

Dates: Mondays, October 23-December 11

Time: 2:30pm, 3:00pm or 3:30pm

Location: Beaumont YMCA, 3251 Beaumont Centre Circle 40513

Ages: 4 & older

Cost: \$74.20/\$63.60 with scholarship

ARCHERY

Learn basic and safe archery skills. Equipment provided. *Limited to 12 people*

Dates: Wednesdays, October 25-December 6

Time: 10:00am-11:30 a.m.

Location: Artworks at the Carver School, 522 Patterson Street

Ages: 18 & over

Cost: \$74.20/\$63.60 with scholarship

SPECIAL EVENTS AND DAY TRIPS

GUYS NIGHT OUT

Spend the evening with your friends attending different community events around Lexington.

Activities: September 12- Soccer game at Henry Clay High School –vs- Dunbar High School
 October 13-High School Football game at Lexington Christian Academy-vs- Dubois Academy
 November 28-Activity TBA

Location: Various

Ages: 18 & Over

Cost: TBA depending on activity

KEENELAND FALL MEET *Limited to 20 people*

Spend the day with friends at the beautiful Keeneland Race Track.

Date: Thursday, October 19

Time: 10am-4:00pm-Drop off and pick at Dunbar Community Center, 545 N Upper Street (40508)

Location: Keeneland Race Track, 4201 Versailles Rd, Lexington, KY 40510

Ages: 18 & Over

Cost: Admission costs TBA. Bring money for food, drinks and misc.

LADIES NIGHT OUT

Spend the evening with your friends attending different community events around Lexington.

Dates: September 14, October 12, November 16

Time and Activities: TBA

Location: Various

Ages: 15 & Over

Cost: TBA depending on activity

Participant's Name: _____

BE THANKFUL SERVICE PROJECT

We all so much to be thankful for in our daily lives. If you would like to be part of a project to give back to others in our community during this Thanksgiving Holiday then register to work with us on a special community project. More details will come after we have completed registration for this opportunity.

Dates: November 21

Time and Location: TBA

Ages: 13 & Over

Cost: FREE

HALLOWEEN COSTUME PARTY

Enjoy an evening of dancing, snacks, costumes and door prizes. Must RSVP to attend.

Date: Saturday, October 28

Time: 6pm - 8pm

Location: Tates Creek Recreation Center

Address: 1400 Gainesway Dr.

Ages: 13 & Over

Cost: \$10.60 per person, payable at door

FALL PROGRAM CELEBRATION

Fun-filled time to celebrate all that our participants have accomplished during the spring programming. Come out to see who scored the most bowling strikes, who hit the most bullseyes in archery or who had perfect attendance at the fall programs. Dinner will be provided with dancing to follow.

Date: Saturday, Dec. 9

Time: 5:00-6:15pm Dinner

6:15pm-7:30pm Program Recognition Awards

7:30pm-9:00pm Dance

Location: Tates Creek Recreation Center, 1400 Gainesway Drive

Ages: 4 and Over

Cost: \$21.20 per person for Dinner and Dance, \$10.60 per person for the dance ONLY, payable at door.

FREE VIRTUAL/ZOOM PROGRAMMING

We are happy to continue to provide select programs through a virtual format using Zoom. Please use the meeting and pass codes provided below to connect with us. A specific calendar will be emailed to you each month with the days and times for each program. **Please make sure we have you current email address to send you the Zoom calendar.** *If you do not have an email address, you may pick up a monthly calendar at the Dunbar Community Center, 3rd Floor.* *Please Note: Days and times of the virtual programs are subject to change for in-person programming.*

Zoom Meeting Code: 792 754 5495 Zoom Passcode: TRzoom

Story Time

Join us as we continue to explore the various books and the adventures they provide.

Cooking Together

Join us on Zoom along with guest chefs to cook a delicious meal or dessert together. We will share easy to follow recipes for the group.

Bingo

Bingo is a fun and interactive Zoom program featuring a different theme each week. Certificates provided to game winners.