



## Support Kids in Pain (SKiP)

**Corporate Office**

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### SKiP Pain Education Program Conditions of Participation

Support Kids in Pain is committed to providing family-centered care in a safe environment. The information and expectations below outline the conditions of participation for families enrolled in the SKiP Pain Education Program.

#### Deposit

Families will be asked to provide a \$100 refundable deposit, payable after the Assessment Day, and prior to Day 1 of the program. Payments should be made to the SKiP bank account, using your child's name as reference.

Account Name	Support Kids in Pain
BSB	124-001
Account Number	21683248

If you are concerned the amount will not clear into our account in time for day 1, please email a copy of the deposit transaction and we can accept this as we wait for the funds to clear. *Please note, the deposit may be waived under special circumstances. Such requests will be considered on a case by case basis by the SKiP Medical Director and Clinical Coordinator.*

At the completion of the program, participants have the option of having the deposit refunded or, to donate the deposit to SKiP. As we are a not-for-profit organization, all deposits donated will be directed to maintaining and improving the program we deliver to the community. In addition, all donations are fully tax deductible.

**To Donate:** Please contact our staff on [referrals@skip.org.au](mailto:referrals@skip.org.au) who will be happy to issue a tax receipt via email.

**To receive your refund:** Please contact our staff on [referrals@skip.org.au](mailto:referrals@skip.org.au) after the Three Month Review Day with your name, your child's name and bank details. Refunds will only be issued on the basis that the participant expectations below have been met.

**Participant expectations:**

- ◆ Due to the high demand for our multidisciplinary services and limited intake capacity, we require all sessions to be well attended. **Cancellation of 2 or more group program therapy sessions will incur the loss of your deposit. Please note, this includes attendance at all parent sessions.**
- ◆ **You agree to bring your child to each program day, even if a flare-up is suspected.** The aim of the SKiP program is to teach children how to cope with the fluctuating nature of chronic pain. There is value in the support, advice and clinical observation that can be offered, even if your child can only manage to attend partially.
- ◆ SKiP will not tolerate profanity, disruptive behavior, or any actions that are threatening to SKiP staff members. Inappropriate or unacceptable behaviours will result in immediate removal from the group and the loss of your deposit.

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Patient/Parent Signature

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Date

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Signature of SKiP Team Member

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Date