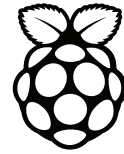


Name: \_\_\_\_\_

# PASSPORT

Age: \_\_\_\_\_



SOMATOPIA

## About Me:

Things I respond well too - things that could help at difficult times.

## Physical characteristics:

About my body and senses – I might need assistance with these

## Friends and family, pets:

About my relationships with others – I have an older sibling, my best friend is...

## Likes and Dislikes:

Tv, Games, Food, Sport.....Sounds, Colours, Materials.

## Communication:

This is the best way to communicate with me.

MY SPECIAL INTEREST FOR THE WORKSHOP (CIRCLE)

MUSIC & SOUND | MOVEMENT & DANCE | TECHNOLOGY & DESIGN