

PARENT'S FORM...

(Fill in information about your child)

BEFORE YOU FILL IN THIS FORM...

Please have (or assist) child in completing the reverse side first, then complete & send to camp!

IMPORTANT NOTE: *Your child's health and welfare are very important to us. You know your child better than anyone. We are counting on your help to make this experience a successful one for you and your child. Add additional comments on back.*



Please be thorough and add any information you feel will help. Don't worry, camp is a safe wholesome place and we will certainly consult you if your child is having problems that we cannot take care of at camp without guidance from you.

If your child has a guidance counselor or case worker we can contact, please include that information on the back of this form.

This column is for younger children....

PAST EXPERIENCE AWAY FROM HOME?

(camp, friends, grandparents etc.)

Where, Length, With Whom, Age at time.

What can you send along that will make his/her cabin "homey"?

What time does she/he go to bed?

What can we do to make her/him feel more comfortable? *(tuck-in, help with letters, hair, etc.)*

What food is she/he allergic to and should not be asked to "Try Our Cooking"?

Any strong fears we should be aware of?

(dark, water, storms, bugs, animals, etc.)

How much time does your child usually spend:

Alone? _____

With one or two others? _____

A group? _____

CAMPER: _____

Dates Attending: _____

Parent or Guardian: _____

Person filling out form: _____

This column is for all campers....

Which best describes his/her personality:

Use: H=highly S=somewhat N=Not so much

___ Outgoing	___ Reserved	___ Shy
___ Emotional	___ Listener	___ Active
___ Energetic	___ Likeable	___ Leader
___ Sensitive	___ Follower	___ Funny
___ Temperamental		

What would you like to see cultivated or developed in your child?

How might your child act out if she/he is frustrated or upset and how do you resolve it? *It helps counselors if you can share as much of your experience as possible.*

What aches and pains are "normal" and what do you do about them?

Any medical or behavioral problems we should be watching for and contact you if they occur?

Please rate your child's pain threshold?

Complains Quickly Average

Usually doesn't say, unless serious

GIRLS:

The camp environment and the change in life-style sometimes triggers or changes menstrual periods.

Has your daughter started? _____

Is she prepared with supplies? _____

Have you explained it to her? _____

What does she take/do for cramps?

Please let her know the camp staff are ready to help!



