

Camper's Name: \_\_\_\_\_ Session: \_\_\_\_\_ Cabin #: \_\_\_\_\_  
Last First

## Parents' Confidential Information

*This form must be sent in at least 3 weeks prior to the camper's arrival at camp.*

In order to be most helpful to your child in his/her adjustment to camp life, to sympathetically understand him/her, and to direct his/her growth and development, we are asking for the following confidential information.

**This information is shared only with relevant staff, and will be used intelligently so that he/she can get the most from their camping experience. Your child will not see this form at camp. Have your camper fill out the camper letter first, before you fill out the informational section of this form.**

Camper's Age: \_\_\_\_\_ Any Brothers?: \_\_\_\_\_ Ages: \_\_\_\_\_ Any Sisters?: \_\_\_\_\_ Ages: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Child lives with (please circle one):      Both Parents      Mother      Father      Guardian

School: \_\_\_\_\_ Grade: \_\_\_\_\_

Personality Traits: Please circle the following characteristics that best describe your camper.

Tense	Shy	Helpful	Happy	Selfish	Leader	Easy Going	
Follower	Cooperative	Nervous	Moody	Quick Learner	Aggressive	Antagonistic	Withdrawn

Needs extra time for \_\_\_\_\_

Makes friends: Easily      Fairly Easily      With Difficulty      Comments \_\_\_\_\_  
*(Circle One)*

Expresses feelings: Easily      Fairly Easily      With Difficulty      Comments \_\_\_\_\_  
*(Circle One)*

What serious fear does your camper have? \_\_\_\_\_

What play activities does he/she most enjoy? \_\_\_\_\_

How does he/she get along with children his/her age? \_\_\_\_\_

Has your child been away from home before? \_\_\_\_\_ How Long? \_\_\_\_\_

This is your child's \_\_\_\_\_ year at Camp Lakewood.      The year my child last attended camp \_\_\_\_\_.

How was his/her experience? \_\_\_\_\_

What do you hope your child will gain from his/her experience at our Camp? \_\_\_\_\_

Which activities or special skills would **you** like to see your child learn, practice, or develop while at Camp? \_\_\_\_\_

What does the **camper** hope to get or learn from Camp? \_\_\_\_\_

How does your child feel about coming to Camp Lakewood? \_\_\_\_\_

Special note regarding camper's health (eating problems, allergies, previous illnesses, bed-wetting, fears or activities they cannot participate in, etc.) \_\_\_\_\_

Please provide any other information, suggestions, or ideas that will help your child's counselor in fulfilling his/her duties and make your child's camping experience a more enjoyable one. \_\_\_\_\_

All beginner (red band) swimmers will take swimming clinic, unless otherwise stated by you (parent).

- I do want my camper to take swim clinic.
- I do not wish to have my camper take swim clinic.

### **Camper Letter**

**Each camper is asked to write a note to his or her counselor before camp begins. In this way, our staff can make the campers feel welcome and know more about each child in his or her cabin group. Campers should be encouraged to complete this letter with some specific things they would like to do at camp this year, and include special interests and camping experiences they hope to gain this summer.**

**Please include some of your hobbies, any nicknames you enjoy, previous camping experiences or special interests you have.**

**Date:** \_\_\_\_\_

**Dear Counselor:**

**Signed:** \_\_\_\_\_