## **Camper Information**



The information on this sheet will help us provide a comprehensive and individual camp experience for your child. The information will only be used by your child's unit head to better prepare the counselors to work with your child. Please be as candid and detailed in your answers, as it will help us get to know your child.

Camper's Name:\_\_\_\_\_\_ Where has your child attended camp before? \_\_\_\_\_

What did your camper like best about camp? \_\_\_\_\_

What did your camper like least? \_\_\_\_\_

Do you have any special concerns? \_\_\_\_\_

Does your camper have any special issues, health handicaps, fears, speech impediments, ADD, difficulty in adjusting to new situations, physical impairments, etc.?

How is your camper feeling about going to camp?

Have there been or will there be any changes in your family situation in the past year? (separation, divorce, illness, death, relocation, new school, new sibling, etc.)

What, if any effect did it have on your camper?

Is there anything else you would like to share that you think would be helpful to us in providing a meaningful experience this summer?

Thank you for taking the time to fill this out!