



## Confidential Camper Information

(to be completed by parent)

Name \_\_\_\_\_ Age \_\_\_\_\_ Date of Birth \_\_\_\_\_

Current Grade \_\_\_\_\_

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

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

1. Who lives in the home?

Father \_\_\_\_\_ Mother \_\_\_\_\_ Names and ages of siblings:

2. If divorced or legally separated, who has custody? \_\_\_\_\_

To Whom may your child be released? \_\_\_\_\_

3. Church Affiliation \_\_\_\_\_

4. Has your son/ daughter previously been to camp? \_\_\_\_\_ How long? \_\_\_\_\_

Name of camp: \_\_\_\_\_

5. What fears, if any, does your child have? \_\_\_\_\_

6. Is your child oversensitive? \_\_\_\_\_ If yes, in what way? \_\_\_\_\_

7. Camper's sleeping habits: Light \_\_\_\_\_ Heavy \_\_\_\_\_ Sleepwalks \_\_\_\_\_ Nightmares \_\_\_\_\_  
Bed Wets \_\_\_\_\_ Just Fine \_\_\_\_\_ All of the above! \_\_\_\_\_

8. Socializing qualities (mixing, group living, etc.): Below Average \_\_\_\_\_ Average \_\_\_\_\_

Above Average \_\_\_\_\_ COMMENTS: \_\_\_\_\_

9. My child is: Very Independent \_\_\_\_\_ Independent \_\_\_\_\_ Average \_\_\_\_\_

Dependent \_\_\_\_\_ Very Dependent \_\_\_\_\_ COMMENTS: \_\_\_\_\_

10. My child makes friends: Easily \_\_\_\_\_ Very Easily \_\_\_\_\_ Average \_\_\_\_\_

Very Slowly \_\_\_\_\_ COMMENTS: \_\_\_\_\_

11. My child has had previous Group Experiences outside of school: Clubs \_\_\_\_\_

Scouts \_\_\_\_\_ Other \_\_\_\_\_ Were these good experiences? \_\_\_\_\_

12. My child's religious interests are: Little \_\_\_\_\_ Some \_\_\_\_\_ Much \_\_\_\_\_  
Average \_\_\_\_\_ Very Much \_\_\_\_\_ COMMENTS: \_\_\_\_\_

13. Does your child have a particular attitude, such as insisting on privacy, toward the use of the bathroom? \_\_\_\_\_

14. We are sending our child to camp for the following reasons: (check as many as apply)  
\_\_\_\_ A summer vacation \_\_\_\_\_ An experience in group living  
\_\_\_\_ Learn to further appreciate the outdoors \_\_\_\_\_ To learn new skills  
\_\_\_\_ To experience camping as you know it \_\_\_\_\_ To have a variety of experiences  
\_\_\_\_ To be a part of a Christian camp; one with a positive atmosphere  
\_\_\_\_ For a special reason \_\_\_\_\_

15. Please list special talents or interests that your child shows evidence of having: \_\_\_\_\_  
\_\_\_\_\_

16. What does the camper do with most of his/her spare time? \_\_\_\_\_  
\_\_\_\_\_

17. What kind of problem, if any, are the counselors most likely to have with your child at camp? \_\_\_\_\_  
\_\_\_\_\_

18. What additional suggestions do you have for the cabin counselors? \_\_\_\_\_  
\_\_\_\_\_

19. Has your child had psychological counseling? \_\_\_\_\_ If so, for how long and for what purpose? \_\_\_\_\_  
\_\_\_\_\_

20. Additional information or comments, if any: \_\_\_\_\_  
\_\_\_\_\_

These questions answered by: \_\_\_\_\_

Relationship to camper: \_\_\_\_\_

Signature: \_\_\_\_\_