

CAMPER INFORMATION RECORD

Give a brief description of your son and include anything you feel will help us to better understand him. Please note any recent major impacts such as: a birth of a sibling, location move, family death, divorce or separation. If you would like to share confidential concerns, a telephone call or letter to the Executive Director is encouraged.

List camper's special interests in program activities: _____

Please explain counseling or psychiatric care administered either currently or in the past: (if none, indicate so)

What advice would you give in dealing with any behavioral traits you have found particularly challenging at home?

How does your son relate to other boys his age? _____

If he doesn't make friends easily, what seems to make it difficult? _____

Our campers are constantly around other people and privacy is rare. How quickly might your son feel overwhelmed, and what behaviors indicate that he's feeling this way? _____

PARENTS' EXPECTATIONS:

Each camper's experience at Camp is somewhat different. What do you hope your son will gain during his time at Camp and what are your goals for him this summer? _____

Your child's counselor will compile a weekly narrative report about your son and we will do our best to include it.

Please inform us of any information you would find helpful in that report: _____

Please send the report to:

Primary Email: _____

Secondary Email: _____