

YMCA Camp Duncan Day Camp Confidential Information from Parent

Camper's Name: \_\_\_\_\_ Session(s) attending: 1 2 3 4 5 6 7 8 9 10  
Last First

**Parents:** We can work more effectively with your child at Day Camp this summer if we know as much about him/her as possible. Please help us by filling in the blanks on this form and returning it to camp **at least 2 weeks prior to when your child will be attending Day Camp.** All information will be strictly confidential and used intelligently in the best interest of your child. This form will be given to your child's counselors to help them provide the best experience possible for your child. Thank you for your assistance.

Well-liked nickname \_\_\_\_\_ Age while at camp \_\_\_\_\_ Birthday \_\_\_\_/\_\_\_\_/\_\_\_\_

Parent/Guardian Name(s) \_\_\_\_\_ Occupation(s) \_\_\_\_\_

Other relatives living in the same house (name and ages) \_\_\_\_\_

Has your child attended Camp Duncan Day Camp previously? \_\_\_\_\_ How many years? \_\_\_\_\_

Does your child have any special needs? \_\_\_\_\_

What in addition to the Health Record should Camp Duncan know about your child in order to serve your goals better? \_\_\_\_\_

Has your child experienced any recent life changes that may affect his/her time at camp? (i.e. recent move, death in the family, etc.) \_\_\_\_\_

Is camper on medication? \_\_\_\_\_

What are camper's major interests? (sports, hobbies, etc.) \_\_\_\_\_

What is the camper's swimming ability? \_\_\_\_\_

What areas of your child's life would you hope to see developed by the camp experience? \_\_\_\_\_

What do you consider his/her strengths and weaknesses? \_\_\_\_\_

What responsibilities does camper have around home and in the community? \_\_\_\_\_

What social contact does camper have with others around his/her own age? \_\_\_\_\_

Any special problems with classmates? \_\_\_\_\_

What serious fears does camper have? (please name them.) \_\_\_\_\_

Any additional information that you feel will help us provide a positive experience for your child: \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date: \_\_\_\_\_