

# YMCA Camp Pandalouan's Camper Confidential Sheet

To fill this form out online go to: <https://goo.gl/forms/3TKTw2MntqgmNFkH3>

Camper's Name \_\_\_\_\_ Session # \_\_\_\_\_

Gender  M  F Birthday \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_

## Please help our counselors get to know your child.

Will your child have a birthday at camp?  Y  N

Will your child be on any medications while at camp?  Y  N

If yes, please explain. \_\_\_\_\_

Does your child have any dietary concerns/food allergies of which we should be aware?  Y  N

If yes, please explain. \_\_\_\_\_

Does your child wet the bed?  Y  N

Does your child tend to get homesick away from home and family?  Y  N

Does your child have a marked fear of: (check all that apply)

the dark?  water?  animals?  thunderstorms?  being alone?  others?

How does your child feel about coming to camp?

\_\_\_\_\_

Attitude towards authority? \_\_\_\_\_

How does your child interact with other children? \_\_\_\_\_

Tell us a bit about your child's behavior in a social setting like camp? \_\_\_\_\_

\_\_\_\_\_

What are your child's interests or hobbies? \_\_\_\_\_

\_\_\_\_\_

Is there a specific activity at camp that your child is looking forward to doing this summer?

\_\_\_\_\_

Is there anything else you think we should know about your child? \_\_\_\_\_

\_\_\_\_\_

Are you concerned about being able to afford appropriate camp gear for your child? We may be able to help.  Y  N

If yes, please explain \_\_\_\_\_