



# Center Day Camp

2010 Parent Confidential Form

Camper's Name \_\_\_\_\_  
Last First

So that we may know your child in a more thorough way, please fill out the information below - if there is any other information you would like to share, do not hesitate to call.

1. Please describe your camper. (personality, special interest, ability to relate with peers/adults, etc)

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2. Does your camper have any fears we should be aware of? (e.g. thunderstorms, darkness, insects)

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3. Are there any special issues or concerns your camper is sensitive about? (e.g. shyness, weight, athletic ability, etc.)

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4. Does your camper require frequent attention, affection, encouragement, or assistance from adults?  
If yes, how does your camper communicate this need?

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5. Is your camper successful and happy at school?

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6. Is there anything, which needs particular attention of the counselor?

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7. Are both camper parents living?  Yes  No

8. Are camper parents:  married  separated  divorce  other \_\_\_\_\_

9. With whom does the camper live? \_\_\_\_\_

Any additional comments, please feel free to describe below and on the back of this page.