

Acquaintance Form

The following form is to help us get more acquainted with your child. We would like to know your child's special interests, strengths, and weaknesses. This way, their designated staff member can keep them well adjusted and happy. Their counselor will work on giving them encouragement in any specific area that they may need (e.g., social, learning, sports, swimming). The information will only be given to your child's counselor, and will be kept confidential.

We may have to divide an age group, please list two children your child would like to be grouped with. Fill in this information where it is written "Choice of friends".

Name of Camper _____ Age _____
Grade Entering _____ What I think you should know about my child _____

Does camper have any severe physical &/or developmental disabilities.? _____

Choice of friends _____

Name of Camper _____ Age _____
Grade Entering _____ What I think you should know about my child _____

Does camper have any severe physical &/or developmental disabilities.? _____

Choice of friends _____

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Does camper have any severe physical &/or developmental disabilities.? _____

Choice of friends _____

Please return this information as soon as possible. Thank you.