

# PERSONAL QUESTIONNAIRE FOR NEW CAMPERS



This form is designed to help us obtain a better understanding of your son. We would like to know something about his likes and dislikes, his interests, his habits, and any other facts which you believe will be important for us to know about him. Please return this form at your earliest convenience.

Name: \_\_\_\_\_

Nickname: \_\_\_\_\_

Parent 1 Name: \_\_\_\_\_ Parent 2 name: \_\_\_\_\_

Grade entering in **September 2020**: \_\_\_\_\_

Please attach a current picture of your son.

1. Camp is a very social experience. During the summer you son will be in close contact with a large number of other people. Please comment on how he gets along with his peers, his siblings, and with adults.

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2. We have noticed that some boys will eat just about anything, while others can be very fussy. Please list any foods your son is allergic to or will not eat:

Allergic To:

Will Not Eat:

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3. As a way to develop responsibility and group cooperation in our campers, the boys are asked to keep their cabins clean for daily inspections. To give us an idea how your son will accept this responsibility, describe any household duties he performs at home.

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4. Many boys of camp age are just beginning to develop proper care for their bodies and their belongings. How far along have your son's personal habits developed?

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5. Please comment on the following:

A. School Achievement

1                      2                      3                      4                      5  
High                      Average                      Below Average

Comments:

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B. Athletic Interest

1                      2                      3                      4                      5  
High                      Average                      Below Average

Athletic Ability

1                      2                      3                      4                      5  
High                      Average                      Below Average

Comments:

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C. Swimming Ability

1                      2                      3                      4                      5  
High                      Average                      Below Average

Comments:

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D. Tennis Ability

1                      2                      3                      4                      5  
High                      Average                      Below Average

Comments:

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E. Emotional Maturity

(Compared with his age group)

1                      2                      3                      4                      5  
High                      Average                      Below Average

Comments:

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F. Potential for Homesickness

1  
High

2

3  
Average

4

5  
Below Average

Comments:

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G. Potential for Bedwetting

1  
High

2

3  
Average

4

5  
Below Average

Comments:

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6. A small number of our campers are prescribed various types of medication for problems with attention span, hyperactivity, and other behavioral/emotional issues.

Over the years, it has been our experience that some parents and doctors are reluctant to provide us with such information out of concern that the child might be labeled or be treated differently at camp.

This could not be further from the truth. We have found that having prior knowledge of any behavioral/emotional issues that our campers might have, allows us to be significantly more helpful in assisting them in making a smooth adjustment to camp life.

Please indicate whether your son is currently receiving or has received medication for attention problems, hyperactivity, or any other behavioral/emotional needs. It is helpful for us to know the dosage and frequency of any medication being taken, so that we can discuss any adjustment to the schedule because of the camp routine.

Please be assured that all of this information will be kept confidential.

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7. The more we know about your son, the better we can plan for his camp experience. We would appreciate any further information that you believe important for us to know about your son. (Family make-up, your son's likes and dislikes, favorite out of school activity—little league, band, pets etc.)

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9.) Do you have any special requests?

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For your son:

1) Who is your favorite professional athlete?

2) What baseball team do you root for?

- 3) What is your favorite meal?
- 4) What is your favorite movie?
- 5) What do you think your favorite activity at camp will be?