Camp Monroe
CAMPER INFORMATION QUESTIONNAIRE

Please fill out all the information requested. This will help us to properly place your child and will enable our staff to provide individual attention where it is indicated. This information will be held strictly confidential. Please return as soon as possible.

_____ ___/___/____ _____/_____ _____ _____
CAMPER'S NAME DATE OF BIRTH AGE YRS/MONTHS ON 6/28/10 GRADE SEPT '10 GENDER

_____ _____
NAME OF SCHOOL CAMPER ATTENDS / TOWN LOCATED IN SIBLINGS: NAMES AND AGES

_____ _____
FATHER'S NAME MOTHER'S FULL MAIDEN NAME

_____
CAMPER'S RELIGIOUS EDUCATION / BACKGROUND

INDICATE PARENT'S MARITAL STATUS:
MARRIED AND LIVING TOGETHER _____
MARRIED AND LIVING SEPARATELY_____ CAMPER LIVES WITH _____ _____
DIVORCED _____ CAMPER LIVES WITH _____ KIND OF RELIGIOUS PARTICIPATION AT HOME

THIS WILL BE THE CAMPER'S_____YEAR AT CAMP MONROE SLEEPAWAY CAMP ATTENDED LAST SEASON_____

WHAT WAS THE CAMPER'S REACTION TO CAMP LAST SUMMER_____

ARE THERE ANY GOALS YOU HAVE FOR THIS SUMMER_____

IS CAMPER ALLERGIC_____ IF SO TO WHAT_____USUAL TREATMENT_____

IS CAMPER A BED-WETTER_____FREQUENT OR OCCASSIONAL_____ DOES WAKING CAMPER AT NIGHT SEEM TO HELP_____

_____
LIST ANY PHYSICAL OR MEDICAL CONDITIONS THAT WE SHOULD BE AWARE OF

_____
LIST PRESCRIBED MEDICATION CAMPER IS TAKING NOW or MEDICATION CAMPER WILL or MAY BE TAKING AT CAMP - EXPLAIN

HAS YOUR CHILD SEEN A PSYCHOLOGIST/PSYCHIATRIST/COUNSELOR/PHYSICAL OR OCCUPATIONAL THERAPIST THIS YEAR_____
IF YES, PLEASE SHARE RELEVANT DETAILS ON THE REVERSE SIDE. INCLUDE DR'S NAME AND PHONE IF APPROPRIATE.

_____
LIST ANY SPECIAL DIETARY NEEDS THAT WE SHOULD BE AWARE OF

_____
LIST ANY FEARS CAMPER MAY HAVE AND RESPONSES THAT YOU HAVE USED SUCCESSFULLY

_____
WE EXPECT ALL CAMPERS TO COME TO CAMP CAPABLE OF TAKING CARE OF MOST PERSONAL NEEDS – BEDMAKING, FOLDING CLOTHES ETC
IS YOUR CHILD READY AND DO WE NEED TO KNOW ANYTHING ABOUT HIS/HER WILLINGNESS/ABILITY/EXPERIENCE IN THIS AREA?

_____
HAVE YOU HAD DISCIPLINE PROBLEMS AT HOME OR AT SCHOOL? ANY METHODS OF DISCIPLINING YOUR CHILD THAT HAVE BEEN SUCCESSFUL

Please use the remaining space and the back of the form, if necessary, to supply additional information. Include anything that will help us to better understand your child, choose suitable bunkmates, and communicate effectively in various situations. Tell us everything important, but we will not necessarily share everything you tell us with the bunk counselor. If you wish, you may even include a separate note, marked private, to include sensitive and important information.