



Camp Soles

CAMPER PROFILE

ATTENTION PARENTS/GUARDIANS

Please take a few moments to fill out this confidential form. It will be shared with your child's counselor on the first day of camp. Counselors use it to ensure that your child has a safe, meaningful, and fun camp experience. Please fill out one form for each camper attending Camp Soles. Remember, your child has changed in the past year. Parents of returning campers should also complete this form. **Please use the back of this form for additional space.**

Camper's Name: _____ [Male [Female

Date of Birth: _____ Age at time of arrival at camp: _____

Siblings - Number of Brothers: _____ Ages: _____ Number of Sisters: _____ Ages: _____

Are any of your child's siblings attending Camp Soles? [Yes [No.

Has your child been away from home before? [Yes [No. If yes, for how long? _____

Has your child been to camp before? [Yes [No. If yes, how was his/her camp experience?

Your child's camp experience is very important to us. Please use this space to describe any important details about your child that will help his/her counselors provide the best support possible.

What are your child's interests, talents, and hobbies? _____

What do you expect your child to gain from his/her experience at camp? _____

Describe any behavioral issues that your child's counselor should be aware of. (i.e., bed-wetting, nightmares, sleep walking, aggressive behavior). _____

What were the major events/accomplishments in your child's life in the past year? Examples include new siblings, a recent death in the family, divorce, a change in your job status, moving, academic excellence, sports achievements. _____

Did we miss something? Is there any additional information we need to know about your camper?
