

# YMCA Camp Roger Camper Information Sheet

(to be completed by camper's parent/guardian. If more space is needed please attach additional sheets)

Camper's Name \_\_\_\_\_ Dates Attending \_\_\_\_\_

Has your child ever been to camp before?    Yes    No

If Yes, which one and for how long? \_\_\_\_\_

1. Which one of the YMCA core values best describe your child?

Caring      Honesty      Respect      Responsibility

2. Is your child afraid of :

Thunder/Lightening    Yes    No

Dark    Yes    No

Being away from home    Yes    No

Bugs/Spiders    Yes    No

Meeting new people    Yes    No

Other (please list)

3. What would you like your child to learn at camp?

4. What makes your child happy?

5. How does your child get along with other children? Adults?

6. How was your son/daughter's school year (good, uneventful, challenging, traumatic)?

7. Has your child been diagnosed as having any learning disability, emotional or behavior problem?

If yes, please explain (The information will be held in confidence, and used only to help us provide the best possible experience for your child.):

8. Is there anything else you would like us to know about your child?

Parent/Guardian's Signature \_\_\_\_\_(Please see reverse)

# YMCA Camp Roger Camper Information Sheet

(to be completed by camper)

Camper's name (what you like to be called) \_\_\_\_\_

1. What did you do last summer?
2. What do you like to do for fun at home?
3. When you're not in school, what's your least favorite thing to do?
4. What's the coolest thing you've ever done?
5. Why did you decide to come to Camp Roger this summer?
6. While you are at camp what would you like to do?
7. What words best describe how you feel about coming to camp this summer?  
Excited Nervous Happy Calm Mad Hopeful Overwhelmed
8. What are your friends like?
9. What grade will you finish before coming to camp?

Camper's Signature \_\_\_\_\_

(please see reverse)